## N23000005828

(Re	equestor's Name)	<del></del>
(Ad	ldress)	
(Ad	idress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	<del> </del>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	-

Office Use Only



100432053591

E CHATHAM

06/28/24--01823--009 ••\$5.00

CABLE AND/OR VIDEO
FRANCHISING
\*\*\*DIVISION OF CORPORATION OF
TALLAHASSEE, FLORIDA

2024 JUN 28 PH 3: 2:

## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at 239-3-1-553 //
(Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment

to

## Articles of Incorporation

of

Save Our	Procloc	V (01P
(Name of Corporation as currently filed with the Florida D	ept. of State)	
N 23c00	0015828	
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Pro</i> j	fit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:	
name must be distinguishable and contain the word "corporate "Company" or "Co." may not be used in the name.	ion" or "incorporated" or t	The new the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	TO Box (	01612
	Ft. Mye	15, FL 33906
D. If amonding the registered agent and/or registered office		
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office ad		the name of the
Name of New Registered Agent:		
	(Florida s	treet (uldress)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:	
thereby accept the appointment as registered agent. I am fam	niliar with and accept the ol	oligations of the po <b>ffy</b> on.
		ZOX CANONIA TALL TALL
Sig	mature of New Registered A	gent, if changing of the Control of
		PH 3: 2

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange X Remove X Add	PT John D V Mike J SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>S</u>	Mary Wallace	1709 Covoractor Por F1 MPF, FC 73901
Remove 2) Change Add	7	Ciraly Banyai	PC Bot 6/6/2 Ft Myers, FL 33906
Remove Change Add	<u>S</u>	Choster Wallace	PC BC+ 61612 ++-Myors, FC 37906
Remove  4) Change Add	<u>49</u>	Darika Formar	PO SCX 61612 Fr. Myers, Fr 33906
Remove 5) Change Add			Partie of the second se
Remove 6) Change Add			18 W 28 P 18 SECTION P 18 SECTI
E. If amending or additional sheet	n <u>g additional Art</u> ets, if necessary).	icles, enter change(s) here: (Be specific)	

	<del>, ,,,,,-</del>	
······		
		<del>- 17.1.1</del>
		99 2
		ZOZI,
		JUN 2 PIE A OH OF OH OF OH OF
		ma::50
		PH 3:
		3: 2 2: 2: 2: 3: 2: 3: 2: 3: 2: 3: 2: 3: 2: 3: 3: 3: 3: 3: 3: 3: 3: 3: 3: 3: 3: 3:
		8 1
The date of each amendment(s) adoption date this document was signed.	ption:	, if other than the
Effective date if applicable:		
-	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depa	does not meet the applicable statutory filing requirements rtment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adoption was/were sufficient for approval.	pted by the members and the number of votes cast for the	amendment(s)

Ø	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.		
	Dated 1012212024		
	Signature		
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)		
	Cirdy Bayai		
	(Typed or printed name of person signing)		
	Diesident		
	` (Title of person signing)		

