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TO: Amendment Section **Division of Corporations**

NAME OF CORPORATI	ON:	V,INC				-
DOCUMENT NUMBER:	N2000006609					
The enclosed Articles of Ar	nendment and fee are sub	mitted for filing.				•
Please return all correspond	lence concerning this mat	ter to the following:				
Jennifer Friend						
	 -	(Name of Contact Pe	erson)			
Alachua County RW, INC						
		(Firm/ Company	·)			
7321 South East 200 Drive						
	_	(Address)				,
Hawthorne, Florida, 32640						
		(City/ State and Zip	Code)			2123
acfrw23@gmail.com					223	NUL EST
	e-mail address: (to be use	d for future annual rep	ort notifica	tion)	<u> </u>	
For further information con	cerning this matter, please	e call:			_	3
Jennifer Friend		at	727	433-7736	of STA SEE. FU	0C :11 14V
	(Name of Contact Person	1)	(Area Code	e) (Daytime Telepl		c
Enclosed is a check for the	following amount made p	ayable to the Florida l	Department	of State:		
■ \$35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Cei s Cei (Ac	2.50 Filing Fee rtificate of Status rtified Copy dditional Copy is aclosed)		
Mailing .	Address	e	ant Address			

Mailing Address
Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Alachua County RW, INC				
(Name of Corporation as currently filed with the F	lorida Dept. o	f State)		
N2000006609				
(Documen	nt Number of C	orporation (if know	m)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this	Florida Not For P	rofit Corporation adopts t	he following
A. If amending name, enter the new name of the co	orporation:			
not applicable				71
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporation" o	or "incorporated" o	r the abbreviation "Corp.	The new " or "Inc."
B. Enter new principal office address, if applicable	not a	pplicable		
(Principal office address <u>MUST BE A STREET ADE</u>				
			·	
				SE
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	not a	pplicable		ALL/G
				ျ က်လ
				<u> </u>
D. If amending the registered agent and/or register new registered agent and/or the new registered	red office add	ress in Florida, en	er the name of the	FATE
no	ot applicable	-		
Name of New Registered Agent:				
		(Florid	i street address)	
New Registered Office Address:		(* ************************************	i were anaressy	
no	ot applicable		. Florida	
_	(Cit	y)	, rionua (Zip Code)	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	gistered Agent I am familiar	<u>:</u> with and accept the	obligations of the position	1.
	not a	policable		
	Signatur	e of New Registered	Agent, if changing	

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: X Change X Remove X Add	PT John Do Y Mike Jo SV Sally Si	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) * Change Add	<u>T</u>	Claudia Jones	8904 North West 37th circle Gainsville, Florida,32653
* Remove			
2) Change Add	<u>T</u>	Wilda Kirkland	PO Box 357903, 32653
Remove 3) Change Add Remove			SILCIRETALLA
4) Change Add	 -		LL DUH 20
Remove			f. the
51 Change Add			SE S
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee	g additional Arti ts, if necessary).	cles, enter change(s) here: (Be specific)	
not applicable			
 			

		
		
		
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		STATE
		- E
The date of each amendment	(s) adoption: June 15th 2023	, if other than the
date this document was signed.		
Effective date if applicable:	June 15th 2023	
is appreasie.	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date no Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes east for the amendment proval.	nt(s)

.	June 15th 2023
Dated 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) Jennifer Friend
	(Typed or printed name of person signing)
	President
	(Title of person signing)