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Tallahassee, FL 32314

COVER LETTER

FO: Amendment Section Division of Corporations

PG Hitmen, Inc					
N23000007890 DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are			_		_
Please return all correspondence concerning this	matter to the follow	ving:			
Sara Castro, Esq.					
	(Name of Cor	ntact Person))		_
Castro Potts Law Firm, PLLC					
	(Firm/ Co	ompany)			_
900 Main Street, Ste 750					
	(Addi	ress)			_
Sarasota, FL 34236					
	(City/ State ar	id Zip Code)		_
contactus@castropotts.com					
E-mail address: (to be	used for future and	ual report n	otification	1)	_
For further information concerning this matter, p	lease call:				
Sara Castro, Esq		941 at		300-9595	
(Name of Contact Pe	erson)	(Are	a Code)	(Daytime Telephone Number)	_
Enclosed is a check for the following amount ma	de payable to the F	lorida Depai	tment of	State:	
■ \$35 Filing Fee		ру	Certifi Certifi	Filing Fee icate of Status led Copy lional Copy is sed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Division	nent Secti of Corpo		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

PG Hitmen, Inc.		
(Name of Corporation as currently filed with the Florida	Dept. of State)	
N23000007890		
(Document Num	nber of Corporation (if kno	wn)
Pursuant to the provisions of section 617.1006, Florida State amendment(s) to its Articles of Incorporation:	utes, this <i>Florida Not For t</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ation:	
		The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	ration" or "incorporated"	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		2. 2
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>S</u>)	1. 15
C. Enter new mailing address, if applicable:		三
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
		<u> </u>
		7.
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		nter the name of the
Name of New Registered Agent:		
	(Flori	da street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere		
I hereby accept the appointment as registered agent. I am,	familiar with and accept th	e obligations of the position.
-	Signature of New Registere	ed 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	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	V	Brittany Brady	11350 SW Lemon Avenue Arcadia, FL 34269
	<u>VD</u>	Kyle Fenton	2025 El Cerrito Court Punta Gorda, FL 33950
Remove 3) _X Change Add Remove	<u>PD</u>	Amanda Fenton	2025 El Cerrito Court Punta Gorda, FL 33950
4) _X Change Add	TSD	Samantha Zaworski	13352 Alandra Drive Punta Gorda, FL 33955
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or add (attach additional sh		Articles, enter change(s) here: 9). (Be specific)	

		
-		·
		
		
		
The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applicable statutory filing requirements, this partment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ac was/were sufficient for approva	opted by the members and the number of votes cast for the amer i.	ndment(s)

sign Envelope ID: DE13E2BE-4EEE-4AA7-93DC-CBDB712FF0F2

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

October 31, 2024

Dated

Docusioned by:

(By the entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Amanda Fenton

(Typed or printed name of person signing)

(Title of person signing)

sign Envelope ID. DE13E2BE-4EEE-4AA7-93DC-CBDB712FF0F2

President, Director