## N1300001640

| (Requestor's Name)                      |
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| PICK-UP WAIT MAIL                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION           | Three Cord Marriage  N:                     | , Inc.  |                       |  |
|-------------------------------|---|---|-----------------------|--|
|                               | N23000012640                                |   |                       |  |
| DOCUMENT NUMBER: _            |   |   |                       | <del>_</del>   |
| The enclosed Articles of Am   | endment and fee are subr                    | nitted for filing.  |                       |  |
| Please return all corresponde | ence concerning this matte                  | er to the following:  |                       |  |
| Raymond L. Funk               |   |   |                       |  |
|                               |   | (Name of Contact  | Person)               |  |
| Three Cord Marriage, Inc.     |   |   |                       |  |
|                               |   | (Firm/ Compa  | iny)                  |  |
| 2816 Huntington St.           |   |   |                       |  |
|                               |   | (Address)   | <u>, -</u>            |  |
| Orlando, FL 32803             |   |   |                       |  |
|                               | -   | (City/ State and Z  | p Code)               |  |
| info@threecordmarriage.co     | n   |   |                       |  |
| E                             | -mail address: (to be used                  | for future annual   | report notification   | 1)   |
| For further information cond  | erning this matter, please                  | call:   |                       |  |
| Raymond L. Funk               |   |   | 407<br>at             | 404-3123   |
|                               | (Name of Contact Person                     |   |                       | (Daytime Telephone Number)   |
| Enclosed is a check for the f | following amount made pa                    | iyable to the Floric  | da Department of      | State:   |
| ■ \$35 Filing Fee             | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing For Certified Copy (Additional copenclosed) | Certif<br>y is Certif | O Filing Fee<br>icate of Status<br>ied Copy<br>tional Copy is<br>osed) |
| Mailing Address               |   |   | Street Address        |  |

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

| N/A   |                              |   |
|---|------------------------------|---|
| (Name of Corporation as currently filed with the Florida D  | ept. of State)               |   |
| N/A   | _                            |   |
| (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 I</i> | For Profit Corporation adopts the following |
| A. If amending name, enter the new name of the corporati  | ion:                         |   |
| N/A   |                              | The new                                     |
| name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.            | ion" or "incorporat          | ed" or the abbreviation "Corp." or "Inc."   |
| B. Enter new principal office address, if applicable:   | N/A                          |   |
| (Principal office address MUST BE A STREET ADDRESS  | )                            |   |
|   |                              | A., A. 40-1                                 |
|   |                              |   |
| C. Enter new mailing address, if applicable:  | N/A                          |   |
| (Muiling address <u>MAY BE A POST OFFICE BOX</u> )  |                              |   |
|   |                              |   |
|   |                              |   |
| D. If amending the registered agent and/or registered office  | ce address in Florid         | a, enter the name of the                    |
| new registered agent and/or the new registered office a   | <u>ddress:</u>               |   |
| Name of New Registered Agent: N/A   |                              |   |
|   |                              |   |
| New Registered Office Address:  |                              | Florida street address)                     |
| N/A   |                              | . Florida                                   |
|   | (City)                       | (Zip Code)                                  |
| New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fac- | Agent: miliar with and acce  | pt the obligations of the position.         |
|   |                              |   |
|   | gnature of New Regi          | istered 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           V         Mike Jo           SV         Sally So | ones                                       |  |
|------------------------------------|--|--|--|
| Type of Action<br>(Check One)      | <u>Title</u>   | <u>Name</u>                                | <u>Addres</u> s                          |
| 1) Change<br>× Add                 | PT   | Raymond L. Funk                            | 2816 Huntington Street Orlando, FL 32803 |
| Remove                             |  |  |  |
| 2) Change Add                      | <u>VS</u>  | Leslie M. Funk                             | 2816 Huntington Street Orlando, FL 32803 |
| Remove 3 ) Change Add Remove       |  |  |  |
| 4) Change Add                      |  |  |  |
| Remove                             |  |  |  |
| 5) Change Add                      |  |  |  |
| Remove                             |  |  |  |
| 6) Change Add                      |  |  |  |
| Remove                             |  |  |  |
| E. If amending or additional sheet |  | icles, enter change(s) here: (Be specific) |  |
| N/A                                |  |  |  |
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| The date of each amendment(s) adoption:  |                                       |
| The date of each amendment(s) adoption:  | , if other than the                   |
| date this document was signed.   |                                       |
|  |                                       |
| Effective date if applicable:  (no more than 90 days after amendment file date)                          |                                       |
| (no more than 90 days after amendment file date)   |                                       |
|  |                                       |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the | nis date will not be listed as the    |
| document's effective date on the Department of State's records.  |                                       |
| ·  |                                       |
| Adoption of Amendment(s) (CHECK ONE)   |                                       |

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

| 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 November 20, 2023   |
| 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) |
| Raymond L. Funk   |
| (Typed or printed name of person signing)   |
| President   |

(Title of person signing)