## N23795

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: MONTH 540	eet Fort Pierce Inc.			
DOCUMENT NUMBER: N 23795	, 			
The enclosed Articles of Amendment and fee are submitted	for filing.			
Please return all correspondence concerning this matter to th	e following:			
Paris Tillman				
Doris Tillman	e of Contact Person)			
Main Street Fort	Pierce, Inc			
122 AE Backus	,, ,			
Fort Pierce, FL (City)	State and Zip Code)			
tillman, dd @ gmail, com L-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Ocris Tilman (Name of Contact Person)	at 777 466 3880 (Area Code) (Daytime Telephone Number)			
Enclosed is a check for the following amount made payable (	to the Florida Department of State:			
(Add	75 Filing Fee & S52.50 Filing Fee ified Copy Certificate of Status ditional copy is Certified Copy (Additional Copy is Enclosed)			
Mailing Address  Amendment Section  Division of Corporations	Street Address Amendment Section Division of Corporations			

Tallahassee, FL 32303

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

INHIN SIRLE	I FORT PIER	E. INC.
(Name of Corporation as currently filed with the	Florida Dept. of State)	•
N & 3 7 9 5		
(Docume	ent Number of Corporation (if know	vn)
Pursuant to the provisions of section 617.1006, Floridamendment(s) to its Articles of Incorporation:	da Statutes, this <i>Florida Not For F</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.	"corporation" or "incorporated" o	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B)	OX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered		ter the name of the
Name of New Registered Agent:		
<u>New Registered Office Address:</u>	(Florid	a street address)
		, Florida
<del>-</del>	(City)	(Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.		obligations of the position.
	Signature of New Registered	d 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>Doe</u> Jones Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change Add	<u>P</u>	Donna Sizemore	GEOG Dickinson terrace
Remove  2) Change Add	<u> </u>	Patti Craft	PSL, FL 34952 8 Harbor Isle Dr E#Z Fort Pierce, FL 34949
Remove Change Add	_5_	Brooke Harris	326 Fernandina St Fort Pierce, FC 3494
Remove 4) Change Add		Ocivid Miller	2400 S. Ocean Dr # 3976
Remove 5) Change Add			Fort Pierce, FL 34949
Remove 6) Change Add	<del></del>		
Remove  E. If amending or add (attach additional she		rticles, enter change(s) here:  (Be specific)	
		( <del></del>	

The date of each amendment(s) adoption:  date this document was signed.  Effective date if applicable:  (no more than 90 days after amendment file date)  if other than the date this document was signed.
08/17/7 07 7
Effective date if applicable:  (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, this 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

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)

(Typed or printed name of person signing)

Canal Security

(Typed or printed name of person signing)