## N95000002089

(Re	questor's Name)	
(Ad	dress)	
	dress)	<u> </u>
(Au	uiess)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
	siness Entity Nam	201
(Bu	siness Entity Nam	ie)
(Do	cument Number)	
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

Northeast F NAME OF CORPORATION:	lorida Live Steamers & Railroaders, Inc.
N95000002089 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Edward G. Pruett	
	(Name of Contact Person)
	(Firm/ Company)
500 Sugar Ridge Court	
	(Address)
Longwood, FL 32779	
	(City/ State and Zip Code)
epruett61@gmail.com	
E-mail address: (t	o be used for future annual report notification)
For further information concerning this matter	er, please call:
Edward Pruett	407 728-9021
(Name of Contac	
Enclosed is a check for the following amount	t made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Certificate of	
Mailing Address	Street Address Amendment Section

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** Articles of Incorporation

of

FILED

NORTHEAST FLORIDA LIVE STEAMERS & I	RAILROADERS, INC.		
(Name of Corporation as currently filed with th	e Florida Dept. of State)	2021 HAR 25	PH 6: 41
N95000002089		SIMPRIME	OF 07:
(Docur	nent Number of Corporati	ion (if known) HAS	SSEE, FI
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida</i>	Not For Profit Co	rporation adopts the following
A. If amending name, enter the new name of th	e corporation:		
n/a			The new
name must he distinguishable and contain the word "Company" or "Co." may not be used in the nam		rporated" or the ab	
D. Enter your avinainal office address if applies	n/a		
B. Enter new principal office address, if applicate (Principal office address MUST BE A STREET A			
	<del></del>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX) n/a		
D. If amending the registered agent and/or regi		Florida, enter the r	ame of the
new registered agent and/or the new register			
Name of New Registered Agent:	Edward G. Pructt		
	500 Sugar Ridge Ct.		
		(Florida street ad	'dress)
New Registered Office Address:			
	Longwood		, Florida
	(City)		(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ager		l accept the obligati	ons of the position.
_	- was	Voita	qui
	Signature of Nev	v 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.

V Mike Jo	<u>ones</u>	
<u>Title</u>	Name	Address
<u>P</u>	Paul Cipriani	St. Augustine, FL 32084
<u>P</u>	Edward Pruett	500 Sugar Ridge Ct Longwood, FL 32779
<u>T</u>	David McLinden	342 Quail Pointe Dr. Ponte Vedre Beach, FL 32082
<u>VP</u>	Stephanie Kolata	517 Antelope Dr Deltona, FL 32725
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<del>.</del>		
	V Mike Jo SV Sally Si Title  P  T  VP  VP	V Mike Jones   SV Sally Smith   Title Name     P Paul Cipriani   P Edward Pruett   T David McLinden

	on:, if other than th
date this document was signed.	
Effective date if applicable: February	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block d document's effective date on the Departr	oes not meet the applicable statutory filing requirements, this date will not be listed as the nent of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)

By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Edward G. Pruett
Edward G. Pruett

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.