P000000 12007

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	RPORATION: Tradewinds, Inc.		
	NUMBER: P00000012007		
	ticles of Amendment and fee are s	ubmitted for filing.	•
Please return all	correspondence concerning this ma	atter to the following:	
	Mary H Hill		
		Name of Contact Person	n
	Tradewinds, Inc.		
		Firm/ Company	
	8887 SE Star Island Way	, ,	
	`	Address	
	Hobe Sound, FL 33455	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Cod	c
		2.1.y, 2.11.12 2.112 3.14 2.22	
	marypattihill@hotmail.com		
	E-mail address: (to be u	ised for future annual report	notification)
F 6 1 1 - 6			
ror lurther infor	mation concerning this matter, plea	ise can:	
Mary Hill		772 at (485-1612
	lame of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a ch	eck for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing F	See \$\int \$\\$43.75 \text{ Filing Fee & Certificate of Status}	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

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Tradewinds, Inc.	<u> </u>	
	rently filed with the Florida Dept. of State)
P00000012007		
(Document Num	ber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	, this Florida Profit Corporation adopts the	following amendment(s)
A. If amending name, enter the new name of the corporation	on:	
		The new
name must be distinguishable and contain the word "corporation". Inc.," or Co.," or the designation "Corp," "Inc," or "Co		
"chartered," "professional association," or the abbreviation "		2
B. Enter new principal office address, if applicable:		29 A
(Principal office address MUST BE A STREET ADDRESS)	-	20 20
		
		≥ 4 €
		9
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8887 SE Star Island Way	0
(g	Hobe Sound, FL 33455	
		·
D. If amending the registered agent and/or registered office	address in Florida, enter the name of the	
new registered agent and/or the new registered office ad		
Name of New Projection of Court		
Name of New Registered Agent		
(Flori	ida street address)	
New Registered Office Address:	, Florida,	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered A	uent.	
I hereby accept the appointment as registered agent. I am fam.		osition.
		
Signature of N	lew Registered Agent, if changing	
Check if applicable		

■ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	D	Guy C Hill	8887 SE Star Island Way
Add X Remove			Hobe Sound, FL 33455
2) Change	D	Mary H Hill	8887 SE Star Island Way
X Add			Hobe Sound, FL 33455
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			· saltena d
5) Change			<u> </u>
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
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	<u> </u>
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(y nor approunte, maieure MA)	
ty nor approunte, mateure tva j	
ty not approunte, mateure tva j	
(y not approunte, maicute (vizi)	
ty nor approasie, mateure ivis	
(y nor approazie, maicule (VA)	
(y not approunte, mateure tva)	
(y not approazie, maicule (VA)	
(y not approazie, mateure ivizi)	
(y nor uppricable, bialcule (VA)	
(y nor uppricable, blatcate (VA)	
(y nor appricable, maicule (VA)	

	April 13, 2020	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
Α	pril 13, 2020	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this d Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder act	ion and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	l(s)
	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	1ent
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
Dated/ Signature/	Uary II IU	
(By	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other cou	
	pinted fiduciary by that fiduciary)	
	Mary H Hill	
	(Typed or printed name of person signing)	-
	Director	
	(Title of person signing)	