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23 JUN 29 PH 1: 08

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	RATION: Trianlge K Ranch,	Inc	
DOCUMENT NUME	P00000018891		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	John W II Burton		
		Name of Contact Persor	1
	John W H Burton, P.A.		
		Firm! Company	
	P. O. Box 1729		
		Address	
	Wauchula, FL 33873		
		City/ State and Zip Code	2
	office@burtonpa.com		
	· ·	sed for future annual report	notification)
	13 mair address. (10 be a	oco ioi initale amidal report	notification)
For further information	n concerning this matter, pleas	se call:	
John Burton		at (773-3241
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 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		Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Trianlge K Ranch, Inc

(Name o	of Corporation as currently	y filed with the Florida Dept. of State)	
P00000018891			
	(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this a	Florida Profit Corporation adopts the following	ıg amendment(s) t
A. If amending name, enter the new na	ime of the corporation:		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Co" chartered," "professional association,"	Corp, "Inc," or "Co". A	company," or "incorporated" or the abbreviati C professional corporation name must contai	on "Corp.,"
B. Enter new principal office address,	if applicable:	2453 Fish Branch Road	
(Principal office address MUST BE A S		Zolfo Springs, FL 33890	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent	OFFICE BOX) ad/or registered office addi		23 JUN 29 PH 1: 08
	2453 Fish Branch Road		
		eet address)	
New Registered Office Address:	Zolfo Springs	, Florida 33890 (Zip)	Code)
7 7		,	,
New Registered Agent's Signature, if c I hereby accept the appointment as regist		<u>:</u> with and accept the obligations of the position.	
x Ch	us time K We Signature of New R	Gaves existered 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)

Example:

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,

X Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Ida Mae Kipp	1227 Fish Branch Road
Add			Zolfo Springs, FL 33890
X Remove			
2) X Change	PSTD	Christine K Wiggins	2453 Fish Branch Road
Add			Zolfo Springs, FL 33890
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

<u>f amending or adding</u> Attach <i>additional sheets</i>	s, if necessary).	(Be specific)			
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f an amendment prov	ides for an each	ange reclassifics	tion or cancellation	an afissued shares	
provisions for implem	nenting the ame	ndment if not cor	itained in the ame	ndment itself:	
(if not applicable,	indicate N/A)				
	· · · · · · · · · · · · · · · · · · ·				
				 	

date this document was signed	(s) adoption:, if other than
Effective date if applicable:	
	(no more than 90 days after amendment file date)
	his block does not meet the applicable statutory filing requirements, this date will not be listed as ne Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without shareholder action and shareholder
■ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
June Dated	21, 2023
Dateu	
Signature	Mistine K. Wiggins
	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court
	pointed fiduciary by that fiduciary)
·	Christine K Wiggins
	(Typed or printed name of person signing)
	President
	(Title of person signing)