## P01000038330

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORP	ORATION: SOUTHERN TRO	PPICS INC	
DOCUMENT NUM	P01000038330		<u></u>
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	LOUIS HADDEN		
	SOUTHERN TROPICS INC	Name of Contact Person	
	22349 COLLINGTON DR	Firm/ Company	
	BOCA RATON FL 33428	Address	,
		City/ State and Zip Code	
For further informa	tion concerning this matter, pleas	se call:	
LOUIS HADDEN		at (	756-5859 de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 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		Street Address 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

SOUTHERN TROPICS INC (Name of Corporation as currently filed with the Florida Dept. of State) P01000038330 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 address: Name of New Registered Agent (Florida street address) , Florida New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New 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	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	S	ELLEN HADDEN	22349 COLLINGTON DR
X Add			BOCA RATON FL 33428
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Remove			

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an amendn	ent provides for an	exchange, reclass	sification, or car	ncellation of iss	ued shares.	
provisions fo	r implementing the	amendment if no	t contained in t	he amendment	itself:	
(if not ap	plicable, indicate N/A	()				
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The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment f	file date)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requestrates of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors withou	t shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for approval.	r the amendment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The each voting group entitled to vote separately on the an	following statement nendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
JUNE 11. Dated	2021	
selecte	irector, president or other officer – if directors or officed, by an incorporator – if in the hands of a receiver, trueted fiduciary by that fiduciary)	ers have not been stee, or other court
	LOUIS HADDEN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	