## P0100085120

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200308416112

01/25/18--01036--020 \*\*35.00



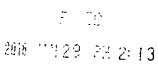
C GOLDEN 2319

## COVER LETTER

**TO**: Amendment Section Division of Corporations

NAME OF CORPO	RATION: David Pearson, Inc.	£	
DOCUMENT NUM	BER:		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	David Pearson		
		Name of Contact Persor	n
	David Pearson, Inc.		
		Firm/ Company	·
	18019 46th Ct N		
	<del>-</del> -	Address	
	Loxahatchee, FL 33470		
		City/ State and Zip Cod	e
đavio	dpearsoninc@aol.com		
	E-mail address: (to be us	sed for future annual report	notification)
	on concerning this matter, pleas		702-5200
Laura Pearson		at (	de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 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 Tallahassec, F1, 32314		Amenc Divisio Clitton 2661 l:	Address iment Section on of Corporations Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of



David Pearson, Inc.

(Name o	f Corporation as currently	filed with the Florida	Dept. of State)	
P01000085120				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006. Florida Statutes, this i	Florida Profit Corporati	on adopts the following amendment(	s) to
A. If amending name, enter the new na	me of the corporation:			
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	Co". A professional co	Thenew	
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>	if applicable: TREET ADDRESS )			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of  D. If amending the registered agent an new registered agent and/or the new	<u>OFFICE BOX</u> ) <u>d/or registered office addr</u>		e name of the	
Name of New Registered Agent	David L. Pearson III	-		
<u>Name oj New Regisjerea Agem</u>	18019 46th Ct N			
	(Florida stre	ret address)		
New Registered Office Address:	Loxahatchee		. Florida	
New Neglistrest Office . Maress.		(City)	(Zip Code)	
New Registered Agent's Signature, if cl I hereby accept the appointment as regist	ered agent. I am familiar w Literal Al	with and accept the obligation of the obligation	- pres.	

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.

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)	<u>Title</u>	<u>Name</u>	Address
1) Change	VD	Zachary W. Pearson	18019 46th Ct N -
X Add			Loxahatchee, FL 33470
Remove			
2) Change	<del> </del>		
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Arti (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	<del></del>
If 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)	
	<u> </u>

•	January 1, 2018	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date we epartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
,	(voting group)	
	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	<del></del> -
<i></i> ,		
	David L. Pearson III	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	