P02000016591

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COVER LETTER

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: AMN PROCESSING INC					
DOCUMENT NUMBER: <u>P0200016591</u>					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
DONALD H MERGENER					
AMN PROCESSINS INC					
993 NEEL CHASE DR					
Address					
57 Augusti NE, Fl. 32086 City/ State and Zip Code					
DHMERGEVELE BELLSONTH. VET E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
DONALD H MERSEUER at GO4 St. Durting Tolophure Number					
Name of Contact Crison					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
☐ \$35 Filing Fee					
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

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- HMN PROCESSING IN	VC	<u> </u>	8
(Name of Corporation as curren	itly filed with the Florida	a Dept. of State)	
P02000016591			
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corpora	tion adopts the following	ig amendment(s) to
A. If amending name, enter the new name of the corporation:			
			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 "P.A	A professional corpora	ated" or the abbreviation name must contain	on "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	993	DEER CHASE	E DR
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			<u>3218</u> 6 3 <u>208</u> 6
D. If amending the registered agent and/or registered office ad	ldress in Florida, enter t	he name of the	
new registered agent and/or the new registered office addre			
Name of New Registered Agent DNALI H 993 DEL C (Florida)	MEDUSEU HASE DR, P street address;	EV	-
New Registered Office Address: ST A(19(057)	(NE (City)	. Florida 32	<u>086</u> Codes
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	nt: r with and accept the obli _s	gations 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.

X Change	<u>PT</u>	John Do	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change		_		·
Add Remove Change Add Remove Add Remove Add Remove Add Remove	2019 2012 PD	ad T	J. Norman Sap DONALD H ME	
4) Change Remove Change	TELO	- \$ A -	Jul DOUALD H.	AMEDE EVEL 993 DEEL CHASE DR STAUGUSTINE, FL 32086
Add Remove 6) Change		_		
Add				

ttach additione	adding additional A al sheets, if necessary,). (Be specific)	M -127	NH	
	•		•	7	
					
			-		
		<u> </u>			
. <u> </u>					
an amendme	nt provides for an ex	change, reclass	ification, or can	cellation of issued sl	nares,
(if not app	implementing the ar licable, indicate N/A)	nenament it not	contained in ti	ie amendment itsen.	N/H
V-1-W1					

.

The date of each amendment(s) adoption: $12-7-202$, if other than the
Effective date if applicable: 12-7-3022 (no more than 90 days after amendment file date)	<u>.</u>
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	rill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action as action was not required.	nd shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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"	
Signature (By a director, president of other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
DOUALD H MERGENER (Typed or printed name of person signing) NEW PRESISTERS AGENT, PD, VD (Title of person signing)	