| (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



400336041054

11/01/19--01012--022 \*\*35.00

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

| NAME OF CORPOR   | RATION: JACTO, INC.                         |  |  |  |  |
|--|---|--|--|--|--|
| DOCUMENT NUME  | P02000042200                                |  |  |  |  |
| The enclosed Articles  | of Amendment and fee are su                 | abmitted for filing.   |  |  |  |
| Please return all corres   | pondence concerning this ma                 | atter to the following:  |  |  |  |
|  | CLAUDETTE SPEAKMAN                          | ī  |  |  |  |
| •  | Name of Contact Person                      |  |  |  |  |
|  | JACTO, INC.                                 |  |  |  |  |
| •  |   | Firm/ Company  |  |  |  |
|  | 3448 Tyringham Drive                        |  |  |  |  |
| •  | <del></del>                                 | Address  |  |  |  |
|  | West Palm Beach, Florida 33                 | 3406   |  |  |  |
| •  |   | City/ State and Zip Code   | 2  |  |  |
| claude   | ttespeak@aol.com                            |  |  |  |  |
| <del></del>  | <del>-</del>                                | sed for future annual report                                       | notification)  |  |  |
|  |   | •  |  |  |  |
| For further information  | concerning this matter, pleas               | se call:   |  |  |  |
| Claudette Speakman   |   | 561  | 707-8748   |  |  |
| ·  | f Contact Person                            | at (561  | _/ <del></del>   |  |  |
| iname o  | Contact Person                              | Area Co  | de & Daytime Telephone Number  |  |  |
| Enclosed is a check for  | the following amount made                   | payable to the Florida Depa  | rtment of State:   |  |  |
| ■ \$35 Filing Fee  | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 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 |   | Amend<br>Divisio   | Address<br>ment Section<br>n of Corporations<br>Building                               |  |  |

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

| JACTO, INC.  |                             |                     |                   |               |                |
|--|-----------------------------|---------------------|-------------------|---------------|----------------|
| (Name of Corporation   | n as currently file         | d with the Florid   | a Dept. of State  | )             |                |
| P02000042209<br>   |                             |                     |                   |               |                |
| (Docume  | ent Number of Cor           | poration (if known  | )                 |               |                |
| Pursuant to the provisions of section 607.1006, Florida S ts Articles of Incorporation:                                      | Statutes, this <i>Flori</i> | da Profit Corpora   | tion adopts the f | ollowing am   | endment(s)     |
| A. If amending name, enter the new name of the cor   | poration:                   |                     |                   |               |                |
|  |                             |                     |                   | The           | new            |
| name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp,"                       | "Inc." or "Co".             | A professional of   |                   |               |                |
| word "chartered," "professional association," or the al  | bbreviation "P.A."          | ,                   | ;                 | VOV           | **             |
| 3. Enter new principal office address, if applicable:  |                             |                     |                   | <u>:</u>      |                |
| Principal office address <u>MUST BE A STREET ADDR</u>  | RESS )                      |                     |                   | P)            |                |
|  | <del></del>                 |                     | •                 | 2             | <del>.</del> . |
|  |                             |                     | <u>r-</u>         | <u></u>       | <del></del>    |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX                                       | ) _                         | _                   |                   | 7             |                |
| -  |                             |                     |                   |               |                |
|  |                             | ·                   |                   |               |                |
|  |                             |                     |                   |               |                |
| <ol> <li>If amending the registered agent and/or registered<br/>new registered agent and/or the new registered of</li> </ol> |                             | n Florida, enter t  | he name of the    |               |                |
| Name of New Registered Agent   |                             |                     |                   |               |                |
|  |                             |                     |                   |               |                |
| <del></del>  | (Florida street ad          | dress)              | <u> </u>          |               |                |
| New Projectored Office Address   |                             |                     | Florida           |               |                |
| New Registered Office Address:   | (City)                      |                     | , Florida_        | (Zip Code)    | <del></del>    |
|  | •                           |                     |                   |               |                |
|  |                             |                     |                   |               |                |
| lew Registered Agent's Signature, if changing Regist   | tered Agent:                |                     |                   |               |                |
| hereby accept the appointment as registered agent. I c   | am familiar with a          | nd accept the obli  | gations of the po | sition.       |                |
|  |                             |                     |                   |               |                |
|  |                             |                     |                   |               |                |
|  | una of Nam Danie            | ered Agent, if chan |                   | <del></del> _ |                |

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 Doc                 |                           |
|----------------------------|--------------|--------------------------|---------------------------|
| 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            | Dielca Speakman-Robinson | 3448 Tyringham Drive      |
| X Add                      |              |                          | West Palm Beach, FL 33406 |
| Remove                     |              |                          |                           |
| 2) Change                  | D            | Tanya Speakman-Pinzon    | 3448 Tyringham Drive      |
| X Add                      |              |                          | West Palm Beach, FL 33406 |
| Remove                     |              |                          |                           |
| 3) Change                  |              |                          |                           |
| Add                        |              |                          | <del>-</del>              |
| Remove                     |              |                          |                           |
| 4) Change                  |              |                          | -                         |
| Add                        |              |                          |                           |
| Remove                     |              |                          | <del></del>               |
| 5) Change                  |              |                          |                           |
| Add                        |              |                          |                           |
| Remove                     |              |                          |                           |
| 6) Change                  |              |                          |                           |
| Add                        |              |                          |                           |
| Remove                     |              |                          |                           |

|   | cles, enter change(s) here: (Be specific)   |
|---|---|
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
| <del> </del>  |   |
|   |   |
|   |   |
|   |   |
|   |   |
| an amendment provides for an excha  | ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself: |
| an amendment provides for an exchaprovisions for implementing the amen<br>(if not applicable, indicate N/A) | ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself: |
| provisions for implementing the amen-   | ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself: |
| provisions for implementing the amen-   | ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself: |
| provisions for implementing the amen-   | ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself: |
| provisions for implementing the amen-   | ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself: |
| provisions for implementing the amen-   | ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself: |
| provisions for implementing the amen-   | ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself: |
| provisions for implementing the amen-   | ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself: |
| provisions for implementing the amen-   | ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself: |

| The date of each amendment(s) adoption: date this document was signed.  | , if other than the  |
|---|--|
| •   |  |
| Effective date if applicable:   |  |
| (no more than 90  | ) days after amendment file date)  |
| Note: If the date inserted in this block does not meet the applic document's effective date on the Department of State's records. | able statutory filing requirements, this date will not be listed as the                  |
| Adoption of Amendment(s) ( <u>CHECK ONE</u> )   |  |
| ■ The amendment(s) was/were adopted by the shareholders. The by the shareholders was/were sufficient for approval.                | number of votes cast for the amendment(s)  |
| ☐ The amendment(s) was/were approved by the shareholders thro must be separately provided for each voting group entitled to v     | ugh voting groups. The following statement of separately on the amendment(s):            |
| "The number of votes cast for the amendment(s) was/were   | sufficient for approval  |
| by  | ."   |
| (voting group)  |  |
| ☐ The amendment(s) was/were adopted by the board of directors action was not required.  | without shareholder action and shareholder   |
| ☐ The amendment(s) was/were adopted by the incorporators with action was not required.  | out shareholder action and shareholder   |
| AUGUST 18, 2019   |  |
| Dated   | _ <del></del>  |
| Signature 12 / and ette 1   | pliclemon_   |
|   | er – if directors or officers have not been hands of a receiver, trustee, or other court |
| CLAUDETTE SPEAKMAN  |  |
| (Typed or printed n   | ame of person signing)   |
| PRESIDENT   |  |
| (Title o  | f person signing)  |