# P02000070221

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
<i>(,</i> .u	uicss,	
(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nan	ne)
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SECRETARY OF STATE TALLAHASSEE

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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: 1-10 TIMBER CO.				
DOCUMENT NUM	1BER: P02000070221				
	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	respondence concerning this ma	tter to the following:			
	CHRIS A. BULLARD				
		Name of Contact Person	1	_	
		Firm/ Company		_	
	PO BOX 1733				
		Address			
	LAKE CITY, FL 32056	City/ State and Zip Code		_	
		•			
	AUDREYSBULLARD@AO	DL.COM sed for future annual report	notification)		
	E-man address, (to be to	sed for future annual report	iterrication)	ZEC DEIS	6707
For further informati	on concerning this matter, plea	se call:	notification)	XRET/ ALLAI	رار
CHRIS A. BULLAF	RD	at ( <u>386</u>	755-4050	SYH SYHH	-
Name	e of Contact Person	Area Co	de & Daytime Telephone Numb	) H	<u> </u>
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	FL	77
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)		
At Di P.	ailing Address mendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Division The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

#### Articles of Amendment to Articles of Incorporation of

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(S	- F. C	Glad saish sha Florida Dans of Cassa)		
P02000070221	or Corporation as currently	filed with the Florida Dept. of State)		
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this I	Florida Profit Corporation adopts the fo	llowing amendment	(s) t
A. If amending name, enter the new n	ame of the corporation:			
			The new	
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contrartered," "professional association,"	Corp," "Inc," or "Co". A	ompany," or "incorporated" or the abbr professional corporation name must	eviation "Corp.,"	
B. Enter new principal office address,	if applicable:			
(Principal office address MUST BE A S	TREET ADDRESS )			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST				
			(0 63	
			75 03 1886	
				-
D. If amending the registered agent ar new registered agent and/or the new			等 第 3	1
	CHRIS A. BUŁLARD		SSE 🛖	II
Name of New Registered Agent	1910 SW SR 47		AHIO: OF ST OSEE, F	
	(Florida stre	ot address)	-F-ATE 25	
	LAKE CITY	32	2025	
New Registered Office Address:		, Florida Cing	(Zip Code)	
		•	•	
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accept the obligations of the pos	ition.	
· never ; wear p · me approximation and vigan		11		
		MARullaul		
	Signature of New Re	gistered Agent, if changing		
	Significant Signs William	american damin's Assemble		

Check if applicable

 $\square$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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	$\underline{V}$	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	VSTD	BULLARD, AUDREY S.	PO BOX 1733
Add			LAKE CITY, FL 32056
X Remove 2) Change	VD	TAMMY BULLARD	1910 SW SR 47
X Add			LAKE CITY, FL 32025
3) X Remove Change	PSTD	CHRIS A. BULLARD	1910 SW SR 47 S
Add			LAKE CITY, FL 32025 CR
Remove 4) Change			TARY OF
Add Remove			E, FL
5) Change			
Add Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, (Attach additional sheets, if necessary). (Be	enter change(s) here: e specific)	
N/A		
		<del></del>
<del></del>		
		-
_		
		-
	<u> </u>	
		S 5
		SECRETARY OF S
F. If an amendment provides for an exchange	e, reclassification, or cancellation of issued shares, ent if not contained in the amendment itself:	HAN I
(if not applicable, indicate N/A)	ent it not contained in the amendment usen:	NGF SSEI
N/A		
		STATE

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The date of each amendment(s) date this document was signed.	adoption:		, if other than the
Effective date <u>if applicable</u> :	(no more than 9	0 days after amendment file date)	
Note: If the date inserted in this		cable statutory filing requirements, this dat	te will not be listed as the
document's effective date on the		, , ,	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators, or	board of directors without shareholder actic	on and shareholder
■ The amendment(s) was/were a by the shareholders was/were		e number of votes east for the amendment(s	;)
		ough voting groups. The following stateme vote separately on the amendment(s):	nt
"The number of votes ca	ist for the amendment(s) was/we	ere sufficient for approval	
by	(voting group)	·"	
	(voting group)		
7/12/202 Dated		- 11.7.1	
Signature	· · · · · · · · · · · · · · · · · · ·	MAThelland	SECR TAL
selec		cer – if directors or officers have not been be hands of a receiver, trustee, or other court )	SECRETARY OF STALLAHASSEE
	CHRIS A. BULLARD		SSEE
	(Typed or printed	name of person signing)	); 25 STAT
	PRESIDENT & DIRECTOR		mi
	(Title of person sig	guing)	

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