P03000026723

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	MENT PLANNING, INC	
DOCUMENT NUM	BER: P03000026723		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	ARTHUR MCKEE IV		
		Name of Contact Person	 .
	MCKEE INVESTMENT PL	ANNING, INC	
		Firm/ Company	_
	18130 W APSHAWA ROAF)	
		Address	
	CLERMONT, FL 34715		•
		City/ State and Zip Code	
	ART@MCKEEINVESTME	NTS.COM	
	E-mail address; (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
ARTHUR MCKEET	V	at (408-4710 le & Daytime Telephone Number
Name of Contact Person		Area Coc	le & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.C	iling Address sendment Section rision of Corporations b. Box 6327 lahassee, FL 32314	Amendi Division The Co 2415 N	Address ment Section to of Corporations entre of Tallahassee Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

2022 FEB 25 PM 1:59

MCKEE INVESTMENT PLANNING, INC.

(Name of Corporation as cu P03000026723	irrently filed with the Florida Depter State 137 STATE
	nber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	on: N/A
	The new on, ""company," or "incorporated" or the abbreviation "Corp., " o". A professional corporation name must contain the word "P.A."
B. Enter new principal office address, if applicable: N/(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac	
Name of New Registered Agent	
(Flo	rida street addressi
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registered a language of the appointment as registered agent. I am fan	Agent: N/A miliar 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)

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	<u>PT</u>	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	VST	JEAN L MCKEE	18130 W APSHAWA ROAD
Add Add			CLERMONT, FL 34715
Remove			
2) Change		MA	
Add			
Remove 3) Change			
Add			
Remove			
4) Change		<u>N/A</u>	
Add			
Remove			
51 Change	~-	<u> N/A</u>	
Add			
Remove			
தி Change		N/A	
Add		ı	
Remove			

en additional she	ng additional Artic rets, if necessary).	(Be specific)	(s) here: N/A		
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				-	
					
<u>an amendment pro</u> rovisions for imple	ovides for an excha ementing the amen	inge, reclassificat dment if not con	<u>ion, or cancellati</u> tained in the ame	<u>on of issued share</u> ndment itself:	
(if not applicable	e, indicate N/A)				N/A
-					
·					

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	doption:	, if other than th
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder act	ion and shareholder
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment officient for approval.	i(s)
	proved by the shareholders through voting groups. The following staten each voting group entitled to vote separately on the amendment(s):	ıeni
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	···	
-	(voting group)	
Dated 2/	20/2022 All Mik For	
(By a d selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other couted fiduciary by that fiduciary)	
	ARTHUR MCKEE IV	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	