D03000044462

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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPO	RATION: Lanier Horseshoe,	ine.				
DOCUMENT NUM	BER:P03000044462					
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.				
Please return all corre	espondence concerning this ma	tter to the following:				
	Alexandra Griffin					
	Name of Contact Person					
	Head, Moss, Fulton & Griffin, P.A.					
	Firm/ Company					
	1530 Business Center Drive, Suite 4			SECRETARY OF STATE TALLAHASSEE, FL		
	Address					
	Fleming Island, FL 32003					
		City/ State and Zip Cod	e	333 34.0		
	agriffin@hmfglaw.com			FAT		
	E-mail address: (to be used for future annual report notification)					
For further information	on concerning this matter, pleas	se call;				
Alexandra Griffin		904 at (541-4515			
Name	of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check f	or the following amount made	payable to the Florida Dep	artment of State:			
S35 Filing Fee	S43.75 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)			
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 of

Lanier Horseshoe, Inc.	
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P03000044462	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The _new
name must he distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P.A.	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	1530 Business Center Drive, Suite 4
(Principal office address MUST BE A STREET ADDRESS)	Fleming Island, FL 32003
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1530 Business Center Drive, Suite 4
(managara)	Fleming Island, FL 32003 Fleming Island, FL 32003 Fleming Island, FL 32003
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	ress in Florida, enter the name of the
Name of New Registered Agent	ATE 22
(Florida et	rect address)
New Registered Office Address:	, Florida
	,
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	: with and accept the obligations of the position.
Signature of New K	Registered Agent, if changing

Check if applicable

 \Box 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 Doc	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>ëddres</u> s
1) Change	P, S	Alexandra Griffin, as Personal Repre	1530 Business Center Drive,
X Add			Suite 4
Remove			Fleming Island, FL 32003
2) Change			
Add			
Remove Change			SECTION TO
Add			经第一
Remove			SSHE FAT
4) Change			7: 22 E. FI
Add			- m
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

The date of each date this documen	amendment(s) ado t was signed.	11/13/2024 ption:	, if other than the
Effective date <u>if a</u>	ipplicable:	(no more than 90 days after amendment file date)	
		(no more than 90 days after amendment file date)	
		ck does not meet the applicable statutory filing requirements, this dat irtiment of State's records.	e will not be listed as the
Adoption of Amendment(s)		(CHECK ONE)	
☐ The amendmen action was not	•	ed by the incorporators, or board of directors without shareholder actio	n and shareholder
	n(s) was/were adopt lders was/were suff	ed by the shareholders. The number of votes cast for the amendment(scient for approval.)
	• •	ved by the shareholders through voting groups. The following stateme ich voting group entitled to vote separately on the amendment(s):	nt
"The nun	nber of votes cast fo	r the amendment(s) was/were sufficient for approval	
by		,"·	
,		(voting group)	
		1/13/24	2024 NOV 19 SECREJAR TALL/H/
:	selected,	etor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	Y OF E
		Alexandra Gittin	7F 2
		(Typed or printed name of person signing)	
		Prisident.	
		(Title of person signing)	