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SECRETARY OF STATE
TALLAHASSEE, FI



M

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: THE RESOURCE	SHOP INC			
DOCUMENT NUM	BER: P03000081548				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	JEFFERY MCGOVERN				
	Name of Contact Person				
	THE RESOURCE SHOP INC				
	Firm/ Company				
	400 N 3RD ST				
		Address		_	
	PALATKA FL 32177				
	City/ State and Zip Code				
	CBSTAX1040@YAHOO.COM				
	E-mail address: (to be us	sed for future annual report	t notification)		
				.T 03S	2024
For further information	on concerning this matter, pleas	se call:			<u></u>
JEFFERY MCGOVERN		770	331-4348	IARY AHA	2024 JUL 18
Name of Contact Person		Area Co	de & Daytime Telephone Number		7
Enclosed is a cheek for	or the following amount made	payable to the Florida Dep	) 331-4348 de & Daytime Telephone Number artment of State: □\$52.50 Filing Fee	: ST/ :E, F	h! : 1 Hal
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is onclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	LATE	F
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio The C 2415	Address Idment Section on of Corporations Jentre of Tallahassee N. Monroe Street, Suite 810 Jassee, FL 32303		

## Articles of Amendment **Articles of Incorporation** of

THE RESOURCE SHOP INC			
(Name of Corporation as current	tly filed with the Florida Dept. of State)		
P03000081548			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the fol	llowing amendment	(s) t
A. If amending name, enter the new name of the corporation:			
		Thenew	
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.4.	A professional corporation name must e	eviation "Corp.,"	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )			
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		s ~2	
		2024 JUL 18 PH 4: 15 SECRETARY OF STAT TALLAHASSEE, FL	,,,,44
		<u>F</u>	
D. If amending the registered agent and/or registered office add	dress in Florida, enter the name of the	HA 18	
new registered agent and/or the new registered office address		TARY OF STATI	1
Name of New Registered Agent		E S	Į
		PA 5	
(Florida si	treet address)	—— [П	
New Registered Office Address:	, Florida		
- · · · · · · · · · · · · · · · · · · ·	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar		ition.	
Signature of New 1	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)

\_\_\_\_ Remove

. .

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	<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	VP	RYAN P MCGOVERN	1918 E HAMPTON CIR	
X Add			WINTER PARK FL 32792	
Remove				
2) Change				
Add				
Remove 3 ) Change				
Add				
Remove				
4) Change		_	<u> </u>	
Add			SECRE	احداجعا
Remove			≥! <b>-</b>	
5) Change				! 
Add				Ü
Remove				-
6) Change				
Add				

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)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	late will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	tion and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	t(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(Votag group)	
Signature  (By a divictor, president of other difficer of directors or officers have not been selected, by an incorporator—if in the hands of a receiver, trustee, or other co-appointed fiduciary by that fiduciary)  JEFFERY MCGOVERN  (Typed or printed name of person signing)  PRES	RETARY OF ST LLAHASSEE.
	FL IS
(Title of person signing)	