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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
	☐ WAIT	MAIL
☐ PICK-UP	☐ WAII	☐ MAIL
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(Do	cument Number)	-
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COVER LETTER

<u>COVER LETTER</u>	
TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: CCSG, INC.	
DOCUMENT NUMBER: $PB3DDDDD23122$	
The enclosed Articles of Amendment and fee are submitted for filing.	
المن المن المن المن المن المن المن المن	
Name of Contact Person	
CCSG, Inc.	
Firm/ Company 2172 Cortez Royad Address	
TackSonville Fl. 32246 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Hixon K. Herron at (904) 626-9854 Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment

to

	Incorporation	
ance T	of	On France
CCDG, TUC.		
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)	
<u> </u>	2122	<u> </u>
(Document Number	er of Corporation (if known)	(4)
Pursuant to the provisions of section 607,1006, Florida Statutes, th its Articles of Incorporation:		ا وی- ng amendment(s) to
A. If amending name, enter the new name of the corporation:	NA	
		_The new
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.A.	A professional corporation name must contain	on "Corp.," in the word
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>)		
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office address		
Name of New Registered Agent		_
(Florida :	street address)	_
N n : 100 111	The day	
New Registered Office Address:	(City), Florida	Code)
		ŕ
New Registered Agent's Signature, if changing Registered Age		
I hereby accept the appointment as registered agent. I am familia	rr with and accept the obligations of the position.	
Signature of New	v Registered Agent, if changing	_

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 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>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			**************************************
Remove			
4) Change	-		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Page 2 of 4

ares reduced

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets,	if necessary).	(Be specific)
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Com land Shares Corresponding
100% Ounon Shin -
D-d., and to HEN 51-2-26
Reducid 10 750 shares
19119Senting 55 10 aunership
Hixon K. Herron Shares increased
to 550 Shares representing 55%
www.ship
Jawn E. Herron reclassification to
Vice president
tixon K. Herron reclassification
Desidont
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

Page 3 of 4
The date of each amendment(s) adoption: December 10 + 2019, if other than
The date of each amendment(s) adoption: Decrobe 10 2014, if other than 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 block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by the shareholders was/were sufficient	y the shareholders. The number of votes cast for the amendment(s) a for approval.
	by the shareholders through voting groups. The following statement orting group entitled to vote 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 action was not required.	y the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder
Dated Decev	abor 10th 2019
Signature	president or other officer indirectors or officers have not been
selected, by a	i incorporator – if in the hands of a receiver, trustee, or other court ciary by that fiduciary)
	Dawn E. Herron
_	(Typed or printed name of person signing)
	President
(Title o	of person signing)