03000)/26/34

(Requestor's Name)	
(Address)	000331271760
(Address)	000331271700
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	06/28/19
Certified Copies Certificates of Status	
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	119 JUH
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	2:2

Office Use Only

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION:	eberg	
	1BER: P03000126134		
The enclosed Article	es of Amendment and fee are su	abmitted for filing.	
Please return all corr	espondence concerning this ma	utter to the following:	
	Nicholas G. Lindeberg		
		Name of Contact Perso	<u> </u>
	NGL Proporties, Inc		
		Firm/ Company	
	8468 Cypress Dr N		
		Address	
	Fort Myers, FL 33967		
		City/ State and Zip Coc	le
NGI	indy@gmail.com		
	<u></u>	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call;	
Nicholas G, Lindeber	rg	at (878-9505
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	artment of State:
□ \$35 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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

NGL Properties, Inc		
(Name of Corporation as	s currently filed with the Florida Dept, of State)	
P03000126134		
(Document)	Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the follow	ring amendment(s) to
A. If amending name, enter the new name of the corpor	ration:	
		The new
name must be distinguishable and contain the word "c "Corp.," "Inc.," or Co.," or the designation "Corp," "I word "chartered," "professional association," or the abbr	Inc," or "Co". A professional corporation name mu	abbreviation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRES</u>	<u>SS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2019 JUH 28 PH
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office.	office address in Florida, enter the name of the	7: 26
Name of New Registered Agent		_
	(Florida street address)	_
New Registered Office Address:	. Florida	
<u> </u>		ip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	n familiar with and accept the obligations of the position	v.
Signature	e of New 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> <u>Jol</u>	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	D	Nicholas G. Lindeberg	8468 Cypress Dr N
Add			Fort Myers, FL 33967
Remove			
2) Change	17TD	Nicholas G. Lindeberg	8468 Cypress Dr N
X Add			Fort Myers, FL 33967
Remove			
3) X Change	D	Kimberly A. Lindeberg	8468 Cypress Dr N
Add			Fort Myers, FL 33967
Remove			
4) Change	VSD	Kimberly A. Lindeberg	8468 Cypress Dr N
X Add			Fort Myers, FL 33967
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
	
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f an amandmant provides for an avail	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

	May 10, 2010
The date of each amendment(s) as date this document was signed.	doption:, if other than
•	1 16, 2019
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	block does not meet the applicable statutory filing requirements, this date will not be listed as partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	<u> </u>
,	(voting group)
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
June 25th,	2019
Dated	
Signature	
	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 court
	ted fiduciary by that fidurary)
арроп	
	Nicholas G. Lindeberg
	(Typed or printed name of person signing)
	Director
	(Title of person signing)
	(Title of person signing)