P04000085018

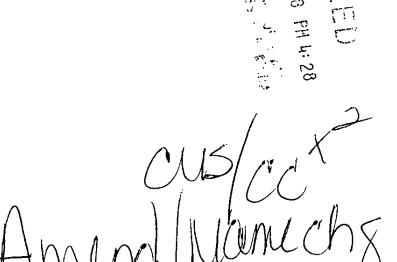
(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
	10	- 40		
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Ви	siness Entity Na	me)		
(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to	Filing Officer:			
		,		





500285896175

05/18/16--01017--022 **61.25



MAY 20 2016 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations -NAME OF CORPORATION: _ LAKE LINDSEY EQUESTRIAN CENTER, INC. **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **DAVID GROVE** Name of Contact Person GROVE TRAILER TRANSPORT, INC. Firm/ Company 8875 Orange Blossom Dr N Address Seminole, FL 33772 City/ State and Zip Code utagrove@mindspring.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **David Grove** Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee \$43.75 Filing Fee & **□\$43.75** Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is **2**_Certified Copy (Additional Copyes enclosed) is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

please
atus

please

return

return

copies

c

Articles of Amendment to Articles of Incorporation of

to

LAKE LINDSEY EQUESTRIAN CENTER, INC.

(Name		filed with the Florida Dept. of S	State)
P04000085678	or corporation as currently	men with the Florida Dept. of S	riate)
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this I	Florida Profit Corporation adopts	the following amendment(s)
A. If amending name, enter the new n	ame of the corporation:		
GROVE TRAILER TRANSPORT, INC			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	Co". A professional corporation	I" or the abbreviation.
B. Enter new principal office address,		and white the	
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		
			4
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			
(1744-1775) Man Coo 177711 1001	07110 <u>2</u> 2021)		- A.
			•
D. If amending the registered agent an new registered agent and/or the ne			the
Name of New Registered Agent	Uta Grove		
	2600 East Bay Drive, Suite	220	
	(Florida stre	et address)	
New Registered Office Address:	Largo	. Flor	33771
	((City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regis			ne position.
	Uta Guve	_	
		egistered 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.

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change				
Add				****
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				,
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add			_	
Remove				

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

• • • • • • • • • • • • • • • • • • • •	doption:	, if other than the
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	plock does not meet the applicable statutory filing requirements partment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the ame officient for approval.	ndment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendmen	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and sh	nareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareh	older
5/13/2016 Dated		
` •	wie Ware lirector, president or other officer - if directors or officers have r	
	 d, by an incorporator – if in the hands of a receiver, trustee, or o ted fiduciary by that fiduciary) 	ther court
	David Grove	
	(Typed or printed name of person signing)	
	President	

(Title of person signing)