P04000160634

(Re	equestor's Name)	
(Ad	ldress)	
(Address)		
(Cit	ty/State/Zip/Phone	· ∍#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	1

Office Use Only



100042834601

12/06/04--01020--004 **35.00

OU DEC -6 PH 3: 34

Merig 19

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: \(\(\frac{\fin}}{\frac{\fir}{\fint}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\fir}{\frac{\frac{\frac{\fin}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\fir}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\fir}{\fin}}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\fir}{\frac{\frac{\frac{\frac{\fir}{\fir}}}}}{\frac{\frac{\fir}{\firac{\fir}}}}{\firac{\fir}{\fi	11111 7U	
DOCUMENT NUMBER: PO4000	160624	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
Van Jones (Name of Co	ontact Person)	
Van Jones To	Company) Inc.	·
885 Benchwa	act Dr.	
Win-ter Springs (City/ State/	FL 3008 and Zip Code)))
For further information concerning this matter, plea	ase call:	
Van Jones (Name of Contact Person)	at (HO) CCC (Area Code & Daytime	-0823 Telephone Number)
Enclosed is a check for the following amount:		
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status "Dept. of State"	□ \$43.75 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 of Corporation of	orations eet

Articles of Amendment
to Articles of Incorporation
of PAR B T
Van Jones Trim, Inc.
(Name of corporation as currently filed with the Florida Dept. of State)
PO4000100000 SEE SEE SEE SEE SEE SEE SEE SEE SE
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
Add: Kevin Reno Henderson - Officer
TIT Oaklane.
Grove land Fl 347360 10% Share
(352)429-5578
ma. 3/2/25
· · · · · · · · · · · · · · · · · · ·
(Attach additional pages if necessary)
If an amendment provides for 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)
. 160
N/H

(continued)

The date of each amendment(s) adoption: 12/104 Effective date if applicable: 12/104 (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signed this day of
Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) (Typed or printed name of person signing) (Title of person signing)

FILING FEE: \$35