## P04000172235

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## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Broad Park Equestrian Services DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Judy Westlake Name of Contact Person Broad Park Equestrian Services Firm/ Company PO Box 1544 Address Loxabatchee, FI 33470 City/ State and Zip Code judy@judywestlake.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Judy Westlake at (207 831-3963

Area Code & Daytime Telephone Number Name of Contact Person 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 Certified Copy enclosed) (Additional Copy 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

19 MAR 22 AMIL NO

## Articles of Amendment to Articles of Incorporation of

Broad Park Equestrian Services		5
(Name of Corporat	tion as currently filed with the Florida Dept. of St	
PO4000172235		
(Docu	unent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Floric its Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the	he following amendment(s) to
A. If amending name, enter the new name of the c	corporation:	
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	p," "Inc," or "Co". A professional corporation n	The new " or the abbreviation came must contain the
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET AD</u>	le: DRESS)	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>9X</u> )	
D. <u>If amending the registered agent and/or registed</u> new registered agent and/or the new registered	ered office address in Florida, enter the name of the former of the fore	<u></u>
Name of New Registered Agent		
<del></del>	(Florida street oddress)	
New Registered Office Address:	, Floric	ia
	(City)	(Zip Code)
New Registered Agent's Simpature, if changing Registered agent.  I hereby accept the appointment as registered agent.	vistered Agent: I am familiar with and accept the obligations of the	position.
Sign	vature of New Registered Agent, if changing	<del></del>

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.

<u>X</u> Change	PT	John De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally St	nith	
Type of Action (Check One)	Title		Name	Address
1) Change	٧		Brian McNeil	PO Box 1544
<u></u> ★ Add				Loxahatchee, Fl 33470
Remove				
2) Change				
Add				<del></del>
Remove				
3) Change		_		
Add				<del> </del>
Remove				
4) Change		_		
Add .				
Remove				
5) Change		<del>-</del>		
Add				
Remove				
6) Change		<del></del>		
Add				
Remove				

	(Be specific)
<del></del>	
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an amendment provides for an exchirovisions for implementing the amer	ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself:
an amendment provides for an exchi- rovisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself:
rovisions for implementing the amer	dment if not contained in the amendment itself:
rovisions for implementing the amer	ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself:
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provisions for implementing the amer	dment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, 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 block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted 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 east 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.	
March 15,2019 Dated	
signature in dy We ste Ke	
(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 count appointed fiduciary by that fiduciary)	
Judy Westlake	
(Typed or printed name of person signing)	
President President	
(Title of person signing)	· · · · · · · · · · · · · · · · · · ·