## P05000065578

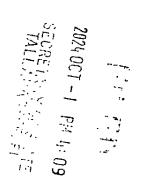
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## COVER LETTER

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: APGJ, Inc. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Cassidy Barber Name of Contact Person Fugate & Fugate Law Firm Firm/ Company P.O. Box 98 Address Williston, FL 32696 City/ State and Zip Code cassidy@normdfugatepa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 352 ) 528-0019

Area Code & Daytime Telephone Number Cassidy Barber Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$52.50 Filing Fee **\$35** Filing Fee ☐\$43.75 Filing Fee & Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

APGJ, Inc.	<u></u>	
(Name of Corporation	as currently filed with the Florida Dept. of State	•
P05000065578		
(Docume)	nt Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	statutes, this Florida Profit Corporation adopts the fo	ollowing amendment(s)
A. If amending name, enter the new name of the corp	poration:	
N/A		The new
name must be distinguishable and contain the word "corp." Inc., " or Co.," or the designation "Corp." "Inc," chartered," "professional association," or the abbrevia	or "Co". A professional corporation name must	reviation "Corp.," contain the word
	N/A	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	PESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
(Studing duaress <u>StAT DE A FOST OFFICE BOOK</u> )	<u> </u>	
		_ <del>_</del>
D. If amending the registered agent and/or registered	d office address in Florida, enter the name of the	024 7A
new registered agent and/or the new registered of	Tice address:	EE OCT
Name of New Registered Agent		<u> 골라.</u> <u>1</u> - 최
		200 - II
•	(Florida street address)	
New_Registered Office Address:	. Florida	四至 0
The Registeres Affect Mary and	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. To	tered Agent: am familiar with and accept the obligations of the po	isition.
Signati	ure of New Registered Agent, if changing	
Check if applicable		

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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	PT	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) X Change	P	Grayson S. Geiger	530 E. Noble Ave
Add			Williston, FL 32696
Remove	ST	Brandi Geiger	530 E. Noble Ave
2) Change		Market Verge.	Williston, FL 32696
X Add			77 HISKII, 1 G 52070
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			20.74 70.74
Add			- CR 00 7
Remove			
6) Change			20 P
Add			- <del> </del>
Remove			:n <b>3</b>

(Attach additional sheets, if necessary). (Be specific)	
N/A	
<u> </u>	<del>-</del> <del></del> -
F. If an amendment provides for an exchange, reclassification, or cancell	lation of issued shares,
provisions for implementing the amendment if not contained in the a (if not applicable, indicate N/A)	menament itself:
N/A	
	202) SEC 17
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the date of each amendment(s date this document was signed.	) adoption:, if other than
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be listed as Department of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and shareholder
■ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
selec	director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)
	Grayson S. Geiger
	(Typed or printed name of person signing)
	President
	(Title of person signing)

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