

## Florida Department of State

**Division of Corporations Electronic Filing Cover Sheet** 

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(((H18000123325 3)))



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To:

Division of Corporations

Fax: Number:

: (850)617-6380

Account Name

: PEEK & ASSOCIATES

Account Number : I20180000018

Phone

(984)596-8524

Fax Number

(904)485~8248

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

cmiska@peekassociates.com Email Address:



## COR AMND/RESTATE/CORRECT OR O/D RESIGN GRIMES PACKAGING SERVICES, INC.

Certificate of Status	0
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## **COVER LETTER**

TO: Amendment Section Division of Corpora				
NAME OF CORPORA	Grimes Pack	aging Service	s, Inc.	
DOCUMENT NUMBE	P05000072355	5		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all correspondent	ondence concerning this ma	tter to the following	ng:	
	J. Jacob R. Pee	ek, Esq.		
_		Name of Cont	act Perso	n
	Peek & Associa	ates		
_		Firm/ Con	прапу	
	200 E. Forsyth	Street		
_		Addre	\$8	
	Jacksonville, F	L 32202		
****		City/ State and	Zip Cod	è
	jpeek@peeka	ssociates.com	1	
	E-mail address: (to be us	sed for future anm	al report	notification)
For further information of	concerning this matter, pleas	se call:		
J. Jacob R. P	eek	at (	904	596-8524
Name of	Contact Person	······································	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Flo	rida Depa	artment of State:
☑ \$35 Filling Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Certified Cop (Additional of enclosed)	y	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ng Address			Address
Amendment Section Division of Corporations				Iment Section
P.O. B			on of Corporations Building	
Tallahassee, FL 32314				Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment **Articles of Incorporation**  (((H18000123325 3))) 2018 MAY 11 AM 9: 23

	of	corporation /
Grimes Packaging Service		TALLAHASSEE
· · · · · · · · · · · · · · · · · · ·	Corporation as current	ly filed with the Florida Dept. of State)
P05000072355		
	(Document Number o	of Corporation (if known)
rsuant to the provisions of section 607.10 Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corporation adopts the following amendmen
If amending name, enter the new nan	se of the corporation:	
Napoyca Legacy 3, Inc.		The new
	tion "Corp," "Inc," or "	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
Enter new principal office address, if	annlieahla-	7 Red Cedar
rincipal office address MUST BE A ST		Amelia Island, FL 32034
Enter new mailing address, if applications address, if applications address and AVRE A POST O		7 Red Cedar
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		Amelia Island, FL 32034
If amending the registered agent and new registered agent and/or the new		
Name of New Registered Agent		<del></del>
_	7 Red Cedar	
	•	reet address) 32034
	Amelia Island	, Florida
New Registered Office Address: _		(City) (Zip Code)

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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:

 $P \sim President; V \sim Vice President; T \sim Treasurer; S \sim Secretary; D \sim Director; TR \sim Trustee; C \sim Chairman or Clerk; CEO \sim Chief Executive Officer: CFO - Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

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 Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nìth</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	<del></del>	_		***************************************
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Cliange		_		
Add				
Remove				
61 (1)				
5) Change		_		
Add				
Remove				-
6)Change		_		
Add				
Remove				

T	Calling and an allowing GN frames	(((H18000123325 3)
If amending or adding additional Arti Attach additional sheets, if necessary).	icies, enter change(s) nere: (Be specific)	
· · · · · · · · · · · · · · · · · · ·		
-		
***************************************		
		·
Y6		
If an amendment provides for an exch provisions for implementing the ame	namee, recrassincation, or cancellate andment if not contained in the amer	on of issued snares. ndment itself:
(if not applicable, indicate N/A)		
	<del></del>	
	•	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	<del></del>
(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	will not be listed as the
document's effective date on the Department of State's records.	
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.	
Dated 4/24/2018	
Signature & Phrineis	
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)	
Thomas L. Grimes	
(Typed or printed name of person signing)	
Chief Executive Officer	
(Title of person signing)	
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