P0600007703

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FILED 2024 JUL 23 PH 3: 49 SECRETANY OF STATE TALLAHASSEE.FL

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: NORTH FLORIDA LAND GROUP, INC.

DOCUMENT NUMBER: P06000007703

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CHRIS A. BULLARD

Name of Contact Person

Firm/ Company

PO BOX 1733

Address

LAKE CITY, FL 32056

City/ State and Zip Code

AUDREYSBULLARD@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 CHRIS A. BULLARD
 at (386)
 755-4050

 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

S43.75 Filing Fee & Certificate of Status S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 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 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

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		of	· · ·
NORTH FLORIDA LAND GROUP, IN	С.		FILEN
(<u>Name</u>	of Corporation as curre	ntly filed with the Florida De	
P06000007703			2024 JUL 23 PH 3: 49
	(Document Numbe	r of Corporation (if known)	SECRETA
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florída Statutes, th	nis Florida Profit Corporation a	adopts the tottow ASSEE In Falts) to
A. If amending name, enter the new n	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association."	Corp, " "Inc, " or "Co"	A professional corporation	" or the abbreviation "Corp.," name-must-contain-the-word
B. <u>Enter new principal office address,</u> (Principal office address <u>MUST BE A S</u>			
C. <u>Enter new mailing address, if appl</u> (Mailing address <u>MAY BE A POST</u>			
D. <u>If amending the registered agent ar</u> new registered agent and/or the new			me of the
Name of New Registered Agent	CHRIS A. BULLARD		
onge of seen to give the angem	1910 SW SR 47		
	(Florida	street address)	·
<u>New Registered Office Address:</u>	LAKE CITY		, Florida 32025
<u></u>		(City)	(Zip Code)

<u>New Registered Agent's Signature, if changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

ARrilland

Signature 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.

Example:

.

<u>X</u> Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
<u>X</u> Add	<u>SV</u>	Sally Smith		
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	DVST	BULLARD, AUDREY S.	PO BOX 1733	
Add			LAKE CITY, FL 32056	
X Remove				
2) Change	VD	Elizabeth Bullard McArdle	1910 SW SR 47	
X Add			LAKE CITY, FL 32025	
3) X Change	PSTD	CHRIS A. BULLARD	1910 SW SR 47	
Add			LAKE CITY, FL 32025	
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change			·	
Add				
Remove				

. If amending or adding additional Arti (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	(be specific)
//A	
· · · · · · · · · · · · · · · · · · ·	
····	
······································	
	and a stranger and a literary of forward above
If an amendment provides for an excr	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	indment if not contained in the amendment itself:
/Α	
<u> </u>	

• •

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 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 incorporators, or board of directors without shareholder action and shareholder action was not required.
- 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 cast for the amendment(s) was/were sufficient for approval

by _

(voting group)

7/12/2024 Dated

ullan

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)

CHRIS A. BULLARD

(Typed or printed name of person signing)

PRESIDENT & DIRECTOR

(Title of person signing)