P07000010910

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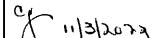
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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: P & 1 Partners DOCUMENT NUMBER: P07000010910 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Vance M. Maiorana Name of Contact Person P & I Partners Firm/ Company 1015 S HWY 17&92 Address Longwood, Florida City/ State and Zip Code gslounge3@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Vance M. Maiorana 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 & S43.75 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 Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

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(Name of Corporation as currently f	led with the Florida Dept. of State)
P & I PARTNERS, INC.	
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	rida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation," "con "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	ipany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	\mathcal{N}/\mathcal{H}
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	./ / A
(Mailing address MAY BE A POST OFFICE BOX)	NIA
	,
-	
D. If amending the registered agent and/or registered office addres	s in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street	address)
V 5 1 100 111	Marida
New Registered Office Address: (C	ty) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with	i and accept the obligations of the position.
1 : 1	
N / K	stered Agent, if changing
Signature of New Regi	stered 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)

Example:

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 Doc 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	<u>P1</u>	John Doe	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	KENNETH E GUTHRIE JR	903 LAUREL STREET
Add			CASSELBERRY, FL 32707
X Remove 2) Change	P	VANCE M. MAIORANA	734 MIMOSA COURT
X Add			WINTER SPRINGS, FL 32708
Remove 3) Change	<u>v</u>	KATHLEEN GERAUD	321 RUTH BLVD
X Add			LONGWOOD, FL 32750
Remove 4) Change			
Add			
Remove 5) Change			
Add			
Remove 6) Change			
Add			
Remove			

(Attach additio	r adding additional Articles, enter change(s) here: nal sheets, if necessary). (Be specific)	
		
provisions fo	ent provides for an exchange, reclassification, or cancellation of issued shares, rimplementing the amendment if not contained in the amendment itself:	
(if not ap	plicable, indicate MA)	
		-

JULY 15, 2022
The date of each amendment(s) adoption:, if other that
date this document was signed.
07/15/2022
Effective date <u>if applicable</u> :
(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 a 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 east 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 ² "
(voting group)
Dated
(By a director, president of 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)
VANCE M. MAIORANA
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)