## P07000076416

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

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NAME OF CORPO	RATION: FATHOM PROCU	JREMENT INC	
DOCUMENT NUM	D07000076416		
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	James Andrews		
		Name of Contact Perso	n
	Andrews Accountancy LLC		
		Firm/ Company	
	8566 NW 19th Dr		
	<del></del>	Address	
	Coral Springs, FL 33071		
		City/ State and Zip Cod	le
	jand592040@aol.com		
	E-mail address: (to be us	sed for future annual report	notification)
	on concerning this matter, plea		
James Andrews		at (	
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:
■ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.C	endment Section ision of Corporations Box 6327 lahassee, FL 32314	Ameno Divisio The C 2415 I	Address dment Section on of Corporations entre of Tallahassec N. Monroe Street, Suite 810 assec, FL 32303

## Articles of Amendment to Articles of Incorporation of

FATHOM PROCUREMENT INC

(Name of Corporation as co	currently filed with the Florida Dept. of State)
P07000076416	
(Document Nu	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporat	tion:
	The new
name must be distinguishable and contain the word "corporati "Inc.," or Co.," or the designation "Corp," "Inc," or "C "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Corp.," Co". A professional corporation name must contain the word 1 "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<u> </u>
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	
Name of New Registered Agent	
(FI	1 that we did not
(rio	lorida street address)
New Registered Office Address:	, Florida
	(City) (Lip Code)
New Registered Agent's Signature, if changing Registered	1 Agent:
hereby accept the appointment as registered agent. I am fai	uniliar with and accept the obligations of the position.
Signature of	f New Registered Agent, if changing
•	
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.012	20 (11) (a) 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 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>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
_X Add	<u>\$V</u>	Sally Sr	nith	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
I) Change	DP		CLAIRE MURRAY FRENCH	597 BELLORA WAY
Add				SARASOTA, FL 34234
Remove  2) Change	DP		MICHAEL FRENCH	597 BELLORA WAY
X Add				SARASOTA, FL 34234
Remove Change		_		
Add				<u>.</u>
Remove 4) Change		_		
Add				
Remove 5) Change		<b>-</b>		
Add				
Remove				
6) Change		_		
Remove				

	r adding additional . nal sheets, if necessar	y). (Be specific,	)			
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///	plicable, indicate N/A	)	- contained in the	411101101111111111111111111111111111111	<del></del>	
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**SEPTEMBER 21, 2021** 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 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 cast for the amendment(s) was/were sufficient for approval **SEPTEMBER 21, 2021** Dated 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) CLAIRE MURRAY FRENCH (Typed or printed name of person signing) VICE-PRESIDENT

(Title of person signing)