P08000076328

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COVER LETTER

Division of Corporations NAME OF CORPORATION: Florida South Electric Inc. DOCUMENT NUMBER: <u>P08 0000 76328</u> The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Hodrea Fuller
Name of Contact Person Florida Suth Electric, Inc 32 Club Side DR.
Address Maples FL 34110 City State and Zip Code E-mail address: (to be used for future annual report potification) For further information concerning this matter, please call: at (<u>239</u>) <u>963 - 77/2</u> Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: **☎** \$35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 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

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment	F	2022 -	
to Articles of Incorporation		یے	
of the state of th	51.		-
- Florida South Electric Inc.	38 C	<u>ئ</u> بي	
(Name of Corporation as currently filed with the Florida Dept. of State)	ن نسر	سلسة	
108000016578	`Q;	ب	ว
(Document Number of Corporation (if known)	70.7	· c	Ω
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the follits Articles of Incorporation:	owing an	nendmo	ent(s) to
A. If amending name, enter the new name of the corporation:			
	Th		
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbre "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must compare the control of the			
B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			
D. If amonding the registered agent and/or registered office address in Florida, anter the come of the			
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:			
Name of New Registered Ayent			
(Florida street address)			
New Registered Office Address:, Florida	(Zip Code,	1	
(Cii))	(Zip Code,	,	
Non-Books and August and Perlamban Programmer			
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the posit	ion		
	1011.		
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)

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 Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	Secretary Scott B. Collins	1090 13th St. SW Maples PL 34117
<u>⊀_</u> Add	•	Maples, CL 34117
Remove		
2) Change		
Add		
Remove Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

	If amending or adding additional Arti- Attach additional sheets, if necessary).	(Be specific)
provisions for implementing the amendment if not contained in the amendment itself:	•	
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provisions for implementing the amendment if not contained in the amendment itself:		<u>.</u>
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself; (if not applicable, indicate N/A)		
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provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	<u>If an amendment provides for an exch</u>	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	provisions for implementing the amer	idment if not contained in the amendment itself:
	(if not applicable, indicate N/A)	
		
		

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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 amenda	ment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	g requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors was not required.	vithout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes c by the shareholders was/were sufficient for approval.	ast for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups must be separately provided for each voting group entitled to vote separately on a "The number of votes east for the amendment(s) was/were sufficient for app by	the amendment(s):
Signature (By a director, president or other officer – if directors or selected, by an incorporator – if in the hands of a receive appointed fiduciary by that fiduciary)	officers have not been
Antea L. Fullet (Typed or printed name of person sign	ning)
President (Fitle of person signing)	-