## P08000103212

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AUG 10 2023

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: South Atlantic Gro	ouper, Inc.			
	MBER:				
The enclosed Artico	les of Amendment and fee are su	bmitted for filing.			
Please return all co	rrespondence concerning this ma	tter to the following:			
	William Russell Copeland				
		Name of Contact Person	1		
	South Atlantic Grouper Inc				
	Firm/ Company 5027 Waterside Dr				
	5027 Waterside Dr				
		Address	<del></del>		
	Port Richey, FL 34668				
		City/ State and Zip Code	e		
	flcfuinc@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informa	tion concerning this matter, pleas	se call:			
Michael Miglini		at ( <u>361</u>	688-9071		
Nan	ne of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
<u>,</u> П Р	Iailing Address Imendment Section Division of Corporations I.O. Box 6327 Iallahassee, FL 32314	Amend Divisio The Co 2415 Y	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303		

## Articles of Amendment to Articles of Incorporation of

South Atlantic Grouper, Inc.

	of Corporation as curren	tly filed with the Florida Dept. of State)	
P08000103212			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 ts Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation adopts the foll	owing amendment(s
A. If amending name, enter the new n	ame of the corporation:		
name must be distinguishable and contain Inc.," or Co.," or the designation "C chartered," "professional association,	Torp," "Inc," or "Co",	"company," or "incorporated" or the abbre A professional corporation name must co	The new viction "Corp" ontain the word
3. Enter new principal office address,	if applicable:	5027 Waterside Dr	
Principal office address <u>MUST BE A STREET ADDRESS</u> )		Port Richey, FL 34668	
			r_;
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		5027 Waterside Dr	C
	<del></del>	Port Richey, FL 34668	•
			<del>- )</del> :
). If amending the registered agent an new registered agent and/or the new	nd/or registered office address	dress in Florida, enter the name of the	22.22
Name of New Registered Agent	William Russell Copelan	d	
	5027 Waterside Dr		<del></del> ,
	tFlorida s	treet address)	
New Registered Office Address:	Port Richey	, Florida <sup>346</sup>	68
		(City)	(Zip Coder

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PVST	Michael Guido Miglini	409 Mills St
Add			Sitka, AK 99835
X Remove  2) Change	PVST	William Russell Copeland	5027 Waterside Dr
X Add			Port Richey, FL 34668
Remove 3 ) Change		N/A	
Add			
Remove		A11.3	
4) Change		N/A	
Add			
Remove 5/ Change		N/A	
Add			
Remove			
6) Change		N/A	
Add			
Remove			

E. <u>If amending or adding additional Articles, enter change(s) here:</u> (Attach additional sheets, if necessary). (Be specific)
N/A
<del></del>
F. 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)
N/A

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June 30, 2023	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
June 30, 2023 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 document's effective date on the Department of State's records.	I not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	Shareholder
☐ 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 <u>N/A</u>	
(voting group)	
June 30, 2023	
Dated	
Signature Michael & Miglini	
(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)	_
Michael Guido Miglini	
(Typed or printed name of person signing)	
PVST	
(Title of person signing)	