

POS000 110368

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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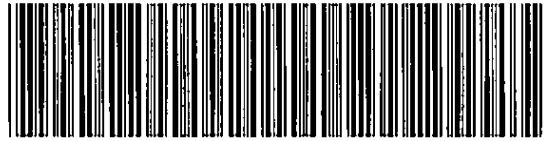
(Business Entity Name)

(Document Number)

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*Amend*

SEP 2 2020  
HALIFAX

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: CEO FINANCIAL SERVICES, INC  
DOCUMENT NUMBER: PO8000110368

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

Please return all correspondence concerning this matter to the following:

CAROL O'NEIL  
Name of Contact Person  
CEO FINANCIAL SERVICES, INC  
Firm/ Company  
8461 LAKE WORTH ROAD STE 433  
Address  
LAKE WORTH, FLORIDA 33467  
City/ State and Zip Code  
Carol@ceofinancialservices.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CAROL O'NEIL at ( 561 ) 389-1227  
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  
☐ \$43.75 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)

**Mailing Address**

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  
to  
Articles of Incorporation  
of

CEO FINANCIAL SERVICES, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P08000110368

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

NO CHANGE

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8461 LAKE WORTH RD  
STE 433  
LAKE WORTH, FL 33467

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8461 LAKE WORTH RD  
STE 433  
LAKE WORTH, FL 33467

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 Agent

NO CHANGE

8461 LAKE WORTH RD STE 433

(Florida street address)

New Registered Office Address:

LAKE WORTH

(City)

Florida

33467  
(Zip Code)

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 position.

\_\_\_\_\_  
Signature of New Registered Agent, if changing

Check if applicable

☒ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

1) <input type="checkbox"/> Change	VSD	JIM O'NEIL	8461 LAKE WORTH RD
<input checked="" type="checkbox"/> Add			STE 433
<input type="checkbox"/> Remove			LAKE WORTH, FL 33467
2) <input checked="" type="checkbox"/> Change	PTD	CAROL O'NEIL	8461 LAKE WORTH RD.
<input type="checkbox"/> Add			STE 433
<input type="checkbox"/> Remove			LAKE WORTH, FL 33467
3) <input type="checkbox"/> Change			
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4) <input type="checkbox"/> Change			
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5) <input type="checkbox"/> Change			
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6) <input type="checkbox"/> Change			
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**E. If amending or adding additional Articles, enter change(s) here:**

(Attach additional sheets, if necessary). (Be specific)

**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)

RECLASSIFICATION OF SHARES TO NEW DIRECTOR EQUIVALENT TO 5% OWNERSHIP DEDUCTED FROM PTID WHEREAS SHAREHOLDER WILL BE 95% OWNERSHIP. STOCK TRANSFER HAS BEEN APPROVED AT SPECIAL MEETING OF SHAREHOLDERS HELD ON SEPT 12, 2020

The date of each amendment(s) adoption: SEPT 12, 2020, if other than the date this document was signed.

Effective date if applicable: SEPT 12, 2020  
(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)

Dated SEPT 12, 2020

Signature Carol O'Neil  
(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)

CAROL O'NEIL

(Typed or printed name of person signing)

Carol O'Neil, RFD

(Title of person signing)