## P09 0000 82591

(Requestor's Name)  (Address)			
(Address)	000337844630		
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	S TALLENT JAN 1 5 7320	2/1901012001 **35.00 2019 DEC 12 PH 1: 5	
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## **COVER LETTER**

TO: Amendment Section

Division of Corp	orations		
NAME OF CORPO	RATION: OSBORN UNLIM	ITED INC.	
	BER: P09000082591		
The enclosed Articles	of Amendment and fee are sui	bmitted for filing.	
Please return all corre	spondence concerning this mat	tter to the following:	
	CATHERINE OSBORN		
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	l .
	UNIQUELY EQUINE		
		Firm/ Company	·· <u>·</u>
	910 N. BROAD ST. LOT 43	3	
		Address	<del></del>
	BROOKSVILLE, FL 34601		
		City/ State and Zip Code	2
САТ	HY@UNIQUELYEQUINE.C	OM	
- CAT		sed for future annual report	notification)
	E-man address (10 00 ac		,
For further information	on concerning this matter, pleas	se call:	
CATHERINE OSBO	DRN	at (	) 232-1645
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Ameno Divisio The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810
		Tallaha	assee, FL 32303

## Articles of Amendment to Articles of Incorporation of

OSBORN UNLIMITED INC		
(Name of Corporation as current	tly filed with the Florida Dept. of Sta	<u>te</u> )
P09000082591		·····
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the	e following amendment(s) to
A. If amending name, enter the new name of the corporation:		
UNIQUELY EQUINE INC		The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name m	bbreviation "Corp" ust contain the word
B. Enter new principal office address, if applicable:	910 N. DROAD 31.	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	LOT 433	. 2
	BROOKSVILLE, FL 34601	P. 15
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	910 N. BROAD ST.	55
	LOT 433	
	BROOKSVILLE, FL 34601	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address Name of New Registered Agent		<u>ne</u>
Name of New Registered Agem		
(Florida s	etreet address)	
	. Floric	la.
New Registered Office Address:	(City)	(Zip Code)
	(6,)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	nt: r with and accept the obligations of the	position.

Signature of New Registered Agent, if changing

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.

Example: 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)	<u>Title</u>	Name /	<u>Addres</u> s
I) Change		$\Delta M/M$	
Add			
Remove			
2) Change	P		
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			<u></u>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
		Page 2 of 4	
E. If amending or additional she	ng addition Pets, if nec	onal Articles, enter change(s) here:  essary). (Be specific)	

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rovisions for implementing th	n exchange, reclassification, or cancellation of issued shi e amendment if not contained in the amendment itself:	ares,
an amendment provides for a rovisions for implementing th (if not applicable, indicate N	e amendment if not contained in the amendment itself:	ares,
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(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 adopt by the shareholders was/were suffi		The number of votes cast for the amendment(s)
☐ The amendment(s) was/were appromust be separately provided for ea	ved by the shareholders sch voting group entitle	s through voting groups. The following statement d to vote separately on the amendment(s):
"The number of votes cast fo	r the amendment(s) was	s/were sufficient for approval
by		
,	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ed by the board of direc	ctors without shareholder action and shareholder
The amendment(s) was/were adopt action was not required.	ted by the incorporators	without shareholder action and shareholder
Dated 01/01/2020 Signature (By a dire	Mercine (	officer – if directors or officers have not been
	by an incorporator – if I fiduciary by that fiduc	in the hands of a receiver, trustee, or other court iary)
C	ATHERINE OSBORN	
_	(Typed or prin	nted name of person signing)
O	WNER/PRESIDENT/	ONLY SHAREHOLDER
$\overline{\Omega}$	itle of person signing)	