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A. BUTLER AUG - 8 2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: $_$	KJ PA
DOCUMENT NUMBER: PO 90000	14733
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this ma	tter to the following:
	DAVID ALAN JONES
	Name of Contact Person
	DAKJ PA
	Firm/ Company
33	6 Magnolia St Address
	-
	Winderwere, FL 34786 City/ State and Zip Code
Pa	Kjones@ Me. Com sector future annual report notification)
E-mail address: (to be us	sed for future annual report notification)
For further information concerning this matter, please	se call:
DAVID A. JONES	at (321) 695 - 2640 Area Code & Daytime Telephone Number
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 \$Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 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

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L) A K \(\nu_{\pi}\)		
(Name of	OAKT PA	filed with the Florida Dent	or state AUG-8 PM 1:00
Poso	00094733		
1070	Document Number of 0		SECRETARY OF STATE
		•	
Pursuant to the provisions of section 607.1 ts Articles of Incorporation:	006, Florida Statutes, this <i>Fl</i>	orida Profit Corporation add	pts the following amendment(s)
A. If amending name, enter the new name	ne of the corporation:		
DAVID ALAN	JONES PA		The new
name must be distinguishable and contain t "Inc.," or Co.," or the designation "Co "chartered," "professional association," o	orp," "Inc," or "Co". A	mpany," or "incorporated" o professional corporation na	r the abbreviation "Corp.," me must contain the word
R Enter new principal office address if	annlicable:	336 Magnol	iast
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		Winderme	ia st re, Fi 34786
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		same as a	bove
D. If amending the registered agent and		ss in Florida, enter the nam	e of the
new registered agent and/or the new			
new registered agent and/or the new		t address)	
new registered agent and/or the new		, in the second	Florida

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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add		-	
Remove			

nacii aaaiii0ii(ii	sheets, if necessary	v). (Be specific	:)			
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an amendment	provides for an e	xchange, reclass	<u>sification, or ca</u>	ancellation of i	ssued shares,	
if not applic	able, indicate N/A))	t tontameu in	the amendmen	it itseit.	
			<u> </u>			
				 -		
				•		

The date of each amendment(s) adopt	ion:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date	2)
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirement of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without share	holder action and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficient	l by the shareholders. The number of votes east for the arent for approval.	nendment(s)
	ed by the shareholders through voting groups. The follow h voting group entitled to vote separately on the amendment	
"The number of votes cast for	he amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated8/8 Signature	Malushises Fines	<i>)</i>
	or, president or other officer – if directors or officers have	
	on incorporator – if in the hands of a receiver, trustee, or iduciary by that fiduciary)	other court
аружной г		
	(Typed or printed name of person signing)	<i>enes</i>
	(Typed or printed name of person signing)	 -
	V. President	
	(Title of person signing)	