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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPO	RATION: Success Property M	anagement, Inc.			
DOCUMENT NUM					
The enclosed Articles	s of Amendment and fee are sub	mitted for filing.			
Please return all corre	espondence concerning this mat	ter to the following:			
	Michael Richard				
		Name of Contact Person			
	Success Property Managemen	t Inc,			
		Firm/ Company		_	
	8368 forest Oaks Blvd				
		Address			
	Spring Hill, FL 34606				
		City/ State and Zip Code		 & &	20:
	successpm@yahoo.com			CRETARY OF STATE	2024 DEC
	E-mail address: (to be us	ed for future annual report	notification)	AH.	9-13
				æ?	တ
For further informati	ion concerning this matter, pleas	se call:			A
Michael Richard		at (	610-4369	STAI	AM 11: 23
Name	e of Contact Person	Area Co	de & Daytime Telephone Nu	mber 🖂	ω
Enclosed is a check	for 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)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
A:	failing Address mendment Section ivision of Corporations	Ameno	Address Iment Section on of Corporations		

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

Success Property Managemen	t, Inc.
	(Name of Cornoration 9)

Success Property Management, Inc.				
(Name of Con	rporation as currently	filed with the Florida Dept. of S	<u>tate</u> )	
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006. its Articles of Incorporation:	Florida Statutes, this F	Torida Profit Corporation adopts	the following amer	ndment(s) to
A. If amending name, enter the new name of	of the corporation:			
NA				new
name must be distinguishable and contain the war "Inc.," or Co.," or the designation "Corp," chartered," "professional association," or the	" "Inc," or "Co". A	professional corporation name	e abbreviation "Co must-contain the	rp.," word
B. Enter new principal office address, if ap (Principal office address MUST BE A STREE	plicable: FT ADDRESS )	NA		_
(Principal office address MOST BE ASTREE	er Abbress )			<del>-</del>
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF).	<u>e:</u> ICE BOX)	NA		- <sub>20</sub>
			CRETA	24 pec
D. If amending the registered agent and/or new registered agent and/or the new reg	registered office addr	ess in Florida, enter the name of	Tthe TASSET	18 AM
Name of New Registered Agent			E E	AM II: 23
			, TH	:3
<del></del>	(Florida str	vet address)		
NA		Γ1-	i.d.a	
New Registered Office Address:	<u> </u>	(City)	(Zip Code)	
New Registered Agent's Signature, if change I hereby accept the appointment as registered	ing Registered Agent agent. I am familiar s	tivith and accept the obligations of	the position.	
	Signature of New R	egistered Agent, if changing		
Check if applicable  The amendment(s) is/are being filed pursu	ant to s. 607.0120 (11)	(e), F.S.		

(Attach additional sheets, if necessary)

address of each Officer and/or Director being added:

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.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and

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 Doc		
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	
1) X Change	PVT	Michael R Richard	1155 Overland Dr	
Add			Spring Hill, FL 34608	
Remove				
2) Change	S	Patricia N Richard	14041 Irving Dr	
X Add			Spring Hill, FL 34609	
Remove 3) Change			SECRE	2024 DEC 18
Add			<u> </u>	813
Remove			ASSE OF	7
4) Change			GEE, FL	MH 11: 23
Add			<del></del>	, (
Remove				
5) Change				-
Add				-
Remove				
δ) Change				-
Add				-
Remove				

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 amendment file date)	
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's rec	e applicable statutory filing requirements, this date will needs.	ot be listed as the
Adoption of Amendment(s) (CHECK ONI	<u>E</u> )	
The amendment(s) was/were adopted by the incorporate action was not required.	ors, or board of directors without shareholder action and sl	hareholder
☐ The amendment(s) was/were adopted by the shareholde by the shareholders was/were sufficient for approval.	ers. The number of votes cast for the amendment(s)	
☐ The amendment(s) was/were approved by the sharehold must be separately provided for each voting group entity	ders through voting groups. The following statement itled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s)	was/were sufficient for approval	
by(voting group)		
		385 2003
Dated_ 12.9.2024	AL:	ECRETAR:
Dated 12.9.2024 Signature Man	>	
(By a director, president or ou	her officer – if directors or officers have not been if in the hands of a receiver, trustee, or other court duciary)	A DEC 18 ANTI: 24 CRETARY OF STAT
Michael R Richard	<u>, '</u>	ATE 24
(Typed or	printed name of person signing)	
President		
(Title of po	erson signing)	