# P10000032670

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SECRETARY OF STATE

Amend

JUL 0 2 2018

I ALBRITTON

# COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	ERTY SUPPORT, INC.		
	BER: P10000032670			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Barbara Humphrey			
		Name of Contact Person	n	
	Law Office of Robert A. Hee			
		Firm/ Company		
	1 Sleiman Parkway, Suite 28	• •		
		Address	<del></del>	
	Jacksonville	,		
		City/ State and Zip Cod	e	
tiohn -	son@sleiman.com			
<del></del>	**	sed for future annual report	notification)	
			,	
For further informatio	n concerning this matter, pleas	se call:		
Barbara Humphrey		904	636-9777 Ex 2	
Name	of Contact Person	at (904 ) 636-9777 Ex 2  Area Code & Daytime Telephone Number		
Caslesad in a about te	with a Call and in a manager and a			
enciosed is a check to	r the following amount made	payable to the Piorida Depa	artment of State:	
S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
<u>Mai</u>	ling Address	Street	Address	
	endment Section	Amendment Section		
	sion of Corporations	Division of Corporations		
	. Box 6327	Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

#### Articles of Amendment

to

## Articles of Incorporation

of

## GENERAL PROPERTY SUPPORT, INC.

( <u>Name c</u>	of Corporation as currer	itly filed with the Florid	la Dept. of State)	
	P100000	)32670		
<del>-</del>	(Document Number	of Corporation (if known	n)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corpora	ation adopts the follow	ing amendment(s) to
A. If amending name, enter the new m	ıme of the corporation:			
N/A				The new
name must be distinguishable and con "Corp ," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp." "Inc." or	"Co". A professional c	incorporated" or the corporation name mus	abbreviation st contain the
B. Enter new principal office address,	if applicable:	N/A		
(Principal office address <u>MUST BE A S</u>				~
				E T
C. Enter new mailing address, if appli		N/A	SS.	27
(Mailing address <u>MAY BE A POST</u> )	<u>OFFICE BOX</u> )		<u> </u>	
			<u>F</u>	
			) RIC	
D. If amending the registered agent an	d/or revistered office ad	dress in Florida, enter t	he name of the	
new registered agent and/or the nev			The transit of the	
Name of New Registered Agent	Rockford Staten			
	1 Sleiman Parkway, Sui	te 270		
	(Florida :	street address)		<del></del>
New Registered Office Address:	Jacksonville		Florida 32216	
<u></u> -		(City)		p Code)
S D	h i D i			
New Registered Agent's Signature, if cl I hereby accept the appointment as regist			igations of the position	1.
	//// //			
	Kianather of Ame	Registered Sount if char	noino	_

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:

 $P_i$  President;  $V^{\perp}$  Vice President;  $T^{\perp}$  Treasurer;  $S^{\perp}$  Secretary;  $D^{\perp}$  Director;  $TR^{\perp}$  Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer: CEO = 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	
$\underline{X}$ Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	COO	Robert K. White	1 Sleiman Parkway, Suite 270
Add			Jacksonville, Florida 32216
X Remove			
2) Change	V	Michael W. Herzberg	1 Sleiman Parkway, Suite 270
X Add			Jacksonville, Florida 32216
Remove			
3.) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	·		
Remove			
KUHOVU			
6) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			

E. If amending (Attach <i>addit</i>	or adding additional Artional sheets, if necessary)	ticles, enter change . (Be specific)	(s) here:		
N/A		• •			
				<del></del>	<del> </del>
			<del> </del>		
			<u></u> ,		
			<del></del> _		-
				,	
	-				
F. If an amend provisions	ment provides for an exc for implementing the am	hange, reclassificate	ion, or cancellation	on of issued shares, adment itself:	
(if not e	upplicable, indicate N/A)				
N/A			·, ,		
					<u> </u>
		·			

The date of each amendment(s) ado date this document was signed.	ption:	, if other than th
. N/A		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, the	is date will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were adopty the shareholders was/were suff	ed by the shareholders. The number of votes cast for the amendacient for approval.	ient(s)
	oved by the shareholders through voting groups. The following statich voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and share	aolder
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholde	er
Dated <u>\lambda</u> \lambda_S	2018	
Signature		
(By a dire selected,	etor, president or other officer – if directors or officers have not by by an incorporator – if in the hands of a receiver, trustee, or other I fiduciary by that fiduciary)	
Н	LIT, SLEIMAN, JR.	
_	(Typed or printed name of person signing)	
\	ice President	
	(Title of person signing)	