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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORATION: Warden and Associates. Corp	
DOCUMENT NUMBER: P10000080864	
The enclosed Articles of Amendment and fee are submitted for filing.	

Please return all correspondence concerning this matter to the following:

	Name of Contact Person
Warden and Associates, Corp	
	Firm/ Company
536 NW Orange Street	
	Address
Lake City, Florida 32055	
····	City/ State and Zip Code
glassslipperformal@gmail.co	m
E-mail address: (to be us	ed for future annual report notification)

For further information concerning this matter, please call:

Mary LaDonna Warden	at (352)	339-5169
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:

S35 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) ×

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> 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

Warden and Associates, Corp

SECRETARY OF STAFF

FILED

2021 NOY 1 PH 3: 22

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

536 NW Orange Street

P1000080864

(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:

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: (Princi

Principal office address <u>MUST BE A S</u>	<u>TREET ADDRESS</u>)	Lake City, FL 32055
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		536 NW Orange Street
		Lake City, FL 32055
 If amending the registered agent an new registered agent and/or the net 		
new registered agent and/or the ne	w registered office addres	
new registered agent and/or the ne	w registered office address Mary LaDonna Warden 536 NW Orange Street	

(City)

(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.

11 ary 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.

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:**

ΡT X Change John Doe X Remove <u>V</u> Mike Jones <u>X</u> Add <u>SV</u> Sally Smith Type of Action <u>Title</u> <u>Name</u> Address (Check One) PTD 1) ____ Change Mary LaDonna Warden 536 NW Orange Street Lake City, FL 32055 ____ Add ____ Remove PTS Jeffrey Laurence Warden 19279 SW State Road 47 2) ____ Change Fort White, FL 32038 ____ Add Х _ Remove 3) _____ Change ____ Add ____ Remove 4) ____ Change ____ Add ____ Remove 5) ____ Change _____ Add Remove 6) ____ Change ____ Add ____ Remove

e attached amendment	(Attach additional sheets, if necessary)	r <mark>ticles, enter change(s)</mark> . (<i>Be specific)</i>	<u></u> .		
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:		2 V			
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10/26/2021

The date of each amendment(s) adoption: ______ date this document was signed.

10/26/2021

Effective date <u>if applicable</u>:

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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 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

	(voting group)
10/26	/2021
Dated	
5	May Laborna Warder By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)
	Mary LaDonna Warden
	(Typed or printed name of person signing)

Owner

(Title of person signing)