

PIO 00000 92272

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

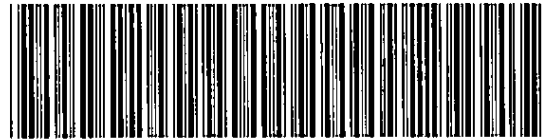
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200388561992

06/21/22--01006--016 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 JUN 21 PM 4:46

FILED

16

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Baron Property Investments Inc
DOCUMENT NUMBER: P100000092272

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Louis Baron
Name of Contact Person
Baron Property Investments Inc
Firm/ Company
1305 Fern Forest Run
Address
Oviedo FL 32765
City/ State and Zip Code
baronproperty@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Louis Baron at (407) 963-9803
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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

☐ 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:

X Change PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>X</u> Change ____ Add ____ Remove	<u>CEO</u>	<u>Louis Baron</u>	<u>1305 Fern Forest Run</u> <u>Oviedo FL 32765</u>
2) <u>X</u> Change ____ Add ____ Remove	<u>P</u>	<u>Tina Baron</u>	<u>1305 Fern Forest Run</u> <u>Oviedo FL 32765</u>
3) ____ Remove ____ Change <u>X</u> Add ____ Remove	<u>VP</u>	<u>Amanda Baron</u>	<u>1305 Fern Forest Run</u> <u>Oviedo FL 32765</u>
4) ____ Change ____ Add ____ Remove	____	____	____
5) ____ Change ____ Add ____ Remove	____	____	____
6) ____ Change ____ Add ____ Remove	____	____	____

FILED
 2022 JUN 21 PM 4:46
 CLERK OF CIRCUIT
 TALLAHASSEE, FLORIDA

(Attach additional sheets, if necessary). (Be specific)

(if not applicable, indicate N/A)

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 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

by _____
(voting group)

Dated June 14 2022

Signature _____

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Louis Baron
(Typed or printed name of person signing)

CEO
(Title of person signing)

FILED
2022 JUN 21 PM 4:46
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA