## "P11000104629

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SECRETARY OF STATIONS
OF CORPORATIONS
12 JAN -3 AH 9: 47

Amend

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION: Emmanue	el supply & ins	urance inc
DOCUMENT NUMBI	P110001046	529	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
<u> </u>	Beauclair Lapla	ante	
. –		Name of Contact Person	n
1	Mission of frate	rnity internatio	nal inc
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k	oo box 7341		
		Address	
F	ort myers FL.	33911	·
_	-	City/ State and Zip Cod	e
emr	nanuelinsurand	ce1@gmail.co	m
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Beauclair La	plante	at ( 239	, 297-4315
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status enclosed)	□\$43.75 Filing Fee & Certified Copy (Additional copy is (Additional C	□\$52.50 Filing Fee Certificate of Status Certified Copy topy is enclosed)
Amen Divisi P.O. E	ng Address dment Section on of Corporations fox 6327 assee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle essee, FL 32301

## Articles of Amendment to Articles of Incorporation of



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

Emmanuel supply & insurance inc

P11000104629

(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:

name must be distinguishable and con "Corp.," "Inc.," or Co.," or the desig word "chartered," "professional associa	ntain the word "corporation," "company." nation "Corp," "Inc," or "Co". A profess ation," or the abbreviation "P.A."	or "incorporated" or the abb ional corporation name must co
B. Enter new principal office address.		
(Principal office address <u>MUST BE A S</u>	STREET ADDRESS )	
C. Enter new mailing address, if app		
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)	
(Mailing address <u>MAY BE A POST</u>		
, <u>u</u>		
). If amending the registered agent a	nd/or registered office address in Florida, 6	enter the name of the
). <u>If amending the registered agent and agent and and are the needs to be the</u>	nd/or registered office address in Florida, esw registered office address:	enter the name of the
). If amending the registered agent a	nd/or registered office address in Florida, en registered office address:  Nocles Metelus	enter the name of the
). <u>If amending the registered agent and agent and and are the needs to be the</u>	nd/or registered office address in Florida, esw registered office address:	enter the name of the
D. If amending the registered agent an new registered agent and/or the ne	nd/or registered office address in Florida, on registered office address:  Nocles Metelus  5527 Granada street  (Florida street address)	enter the name of the

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 <math>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	<u>PT</u> Joh	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ce Jones	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add Remove	Р	Marie Jean	523 NE 15th ave Cape coral FL 33909
2) Change Add Remove	<u>PTD</u>	Marie Laplante	523 ne 15th ave Cape coral FL 33909
3 ) Change Add Remove	<u>s</u>	Beauclair Laplante	523 ne 15th ave Cape coral FL 33909
4) Change x Add Remove	SV	Nocles Metelus	5527 Granada street Fort myers FL 33919
5) Change Add X Remove	<u>VP</u>	Jacnet Pierre	5527 Granada street Fort myers FL 33919
6) Change Add Remove	<del></del>	- <del></del>	

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an amendment provides for a	, , , , , , , , , , , , , , , , , , ,	alossification	or concellation	n af icenad char	DC .
rovisions for implementing th	<u>ne amendment</u>	if not contain	ed in the amend	dment itself:	<u> </u>
(if not applicable, indicate)	N/A)				
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	option:
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
☐ The amendment(s) was/were appromust be separately provided for a	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast f	or the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were adopaction was not required.  ☐ The amendment(s) was/were adop	pted by the board of directors without shareholder action and shareholder of the incorporators without shareholder action and shareholder
☐ The amendment(s) was/were adoption was not required.	pted by the board of directors without shareholder action and shareholder
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