P12000045560

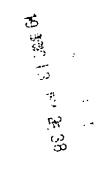
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORE	PORATION: Ark Holdings, Inc		
DOCUMENT NU	PT12000045560		
The enclosed Artic	les of Amendment and fee are su	bmitted for filing.	
Please return all co	rrespondence concerning this ma	tter to the following:	
	William F Ladson		
		Name of Contact Person	n .
	Ark Holdings, Inc		_
	_	Firm/ Company	
	Post Office Box 1617		
		Address	
	Thomasville, GA 31799		
		City/ State and Zip Code	e
w.	ladson3@gmail.com		
	- -	sed for future annual report	notification)
		•	
For further informa	tion concerning this matter, pleas	se call:	
William Ladson		229 at (2246875
Nar	ne of Contact Person		de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Д Р	Iniling Address Imendment Section Division of Corporations I.O. Box 6327 Callahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section In of Corporations Entre of Tallahassee N. Monroe Street, Suite 810 Issee, FL 32303

Articles of Amendment to Articles of Incorporation of

Ark Holdings, Inc.			
	tly filed with the Florida Dept. of St	ate)	
P12000045560	60		
	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts to	ne following amendm	nent(s) to
A. If amending name, enter the new name of the corporation:			
		The nev	u'
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name n	abbreviation "Corn	••
B. Enter new principal office address, if applicable:	327 North Broad Street		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Thomasville, GA 31792		
		2019	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Post Office Box 1617	9000	
	Thomasville, GA 31799	; ω	-,
			, , , ,
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address	dress in Florida, enter the name of t	he S	-رن <i>ه</i> *
Name of New Registered Agent	-		
		 -	
(Florida s	reet address)	-	
New Registered Office Address:	, Floric		
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the	position.	
Signature of New I	Registered Agent, if changing		

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; CE() = 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	<u>PT</u>	John Doe			
X Remove	$\underline{\mathbf{V}}$	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address	
1) Change	D/O	Jennifer —	W Ladson	904 Gordon Ave	
Add X				Thomasville, GA 31792	
Remove 2) Change	D/P/S/	T William	F Ladson	904 Gordon Ave	_
X Add				Thomasville, GA 31792	
Remove 3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change		-			
Add					
Remove					
			Page 2 of 4		
E. If amending or addir	n <u>e additi</u>	onal Articles, enter	change(s) here:		

•		
		.
		
	····	
		· -
·		
<u>-</u> -		
F. If an amendment provides for an exchange, reprovisions for implementing the amendment (if not applicable, indicate N/A)	t if not contained in the amendment itself:	
		
		-
		
	Page 3 of 4	
The date of each amond mark(s) advanta		20.1
date this document was signed.		, it other than th
Effective date <u>if applicable</u> :		
(n	o 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)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) officient for approval.	
	proved 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	for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated 12-11-19		
Signature		
(By a di selected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	William F Ladson, III	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	