P1300000 3368

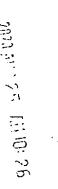
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: D&S GRIFFIS TI	MBER, INC	
DOCUMENT NUN	1BER: P13000003368		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	DAVID W GRIFFIS		
		Name of Contact Persor	
	D & S GRIFFIS TIMBER, IN	1C	
		Firm/ Company	
	7284 45TH ROAD		
		Address	
	LIVE OAK, FL 32060		
		City/ State and Zip Code	<u> </u>
	chessy.2180@gmail.com		
	• • •	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	365-2130
Nam	e of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	irtment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status
	ailing Address		Address
Amendment Section Division of Corporations		Amendment Section Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

n	2. 5	GR	PEFIC	TIME	ER INC
1,	4W .7	111	1 1 1 1 1 3	1 117113	CK HIVE

2 7 1 20 7 10:25

(<u>Name</u>	of Corporation as currer	ntly filed with the Florida Dept. of State)	
P13000003368			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	is Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new n	ame of the corporation:	The new	
	Corp, " "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		7284 45TH ROAD	
		LIVE OAK, FL	
		32060	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7284 45TH ROAD	
		LIVE OAK, FL	
		32060	
D. If amending the registered agent an new registered agent and/or the ne		dress in Florida, enter the name of the	
	DAVID W GRIFFIS		
<u>Name of New Registered Agent</u>	7284 45TH ROAD		
	(Florida :	street address)	
New Registered Office Address:	LIVE OAK	. Florida 32060	
		(City) (Zip Code)	
	tered agent. I am familia.	nt: r with and accept the obligations of the position. Legistered Agent, if changing	
Check if applicable	erg. with a sy then	due en regame à gamene	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	D	SAMUEL W GRIFFIS	7292 45TH RD
Add			LIVE OAK, FL
X Remove			32060
2) X Change	P	DAVID W GRIFFIS	7284 45TH ROAD
Add			LIVE OAK, FL
Remove 3) Change			32060
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
· · · · · · · · · · · · · · · · · · ·
F. 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: (if not applicable, indicate N/A)
N/A

,

	doption:	, if other than the
date this document was signed.	2/2020	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the Do	lock does not meet the applicable statutory filing requirements, the partment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholde	r action and shareholder
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendatificient for approval.	nent(s)
,	proved by the shareholders through voting groups. The following st 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	<u> </u>	
	(voting group)	
08/12/2020 Dated		
Signature	rector, president or other officer – if directors or officers have not be	.
selecte	rector, presider of the officer — if directors or officers have not be an incorporator — if in the hands of a receiver, trustee, or other led fiduciary by that fiduciary)	peen court
	DAVID W GRIFFIS	
	(Typed or printed name of person signing)	
	PRESIDENT	

(Title of person signing)