P130000 19334

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
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(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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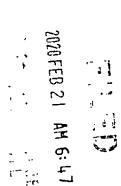
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COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: K&T OF OSCEOLA DOCUMENT NUMBER: P13 000019334
DOCUMENT NUMBER: P /3 0000 / 9 334
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 KRI OF OSCEOLA Firm/ Company 13 E. 13/4 STR. Address St. Clain FL 34.769 City/ State and Zip Code Karl theobold a earth link. Met E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
KARL TAROBITO at (40) 709-038) 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:
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

Articles of Incorporation

of		
(Name of Corporation as currently	INC.	
(Name of Corporation as currently	filed with the Florida Dept. of Sta	<u>ite</u>)
P13 0000 193	334	
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts th	e following amendment(s)
A. If amending name, enter the new name of the corporation:		
NA		The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the o professional corporation name m	ubbreviation "Corp.," ust contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	
		7.02
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	\mathcal{N}/\mathcal{A}	2
(Manng united MAT BEAT OF OFFICE BOA)		
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D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:		ne
Name of New Registered Agent	J/A	
(Florida stre	et address)	.
New Registered Office Address:	, Floric	la
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		position.
Signature of New Re	egistered Agent, if changing	

Check if applicable

☐ 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.

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) 1) Change	Title	Thomas Griffin	Address 4155 QUAIL WOOD DE SAINT CLOUD, PC
Remove 2) Change Add			<u>34772-769</u> 2
Remove Change Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

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an amendment provides for an exc	change, reclassific	cation, or cancellat	ion of issued share	s .
	endment if not co	ntained in the am	endment itself:	
provisions for implementing the am				
orovisions for implementing the am (if not applicable, indicate N/A)				
orovisions for implementing the am (if not applicable, indicate N/A)				
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provisions for implementing the am (if not applicable, indicate N/A)				

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The date of each amendment(s) adoption: $\frac{2/10/2020}{}$, if other than the
date this document was signed.
Effective date if applicable: 2/10/2020
(no môre 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)
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)
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)