P13000030869

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R. SVHITE FEB 1 0 2021



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: D P Gas Company		<u> </u>
DOCUMENT NUMB			.
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Daniel Price		
•		Name of Contact Persor	1
	D P Gas Company		
•		Firm/ Company	
	4231 Country Breeze Lane	, -	
		Address	
	Crestview, FL 32539		
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code	2
	thegasologist@gmail.com		
	0 0 00	sed for future annual report	notification)
	D-Hall address. (to be us	sed for fatore annual report	Hottications
For further information	concerning this matter, pleas	se call:	
Lacey Price		at (598-9128
	f Contrat Person		598-9128 de & Daytime Telephone Number
Name of Contact Person		Alta Co	de & Daytine Telephone Ivalioei
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Fiting Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi	ing Address ndment Section sion of Corporations Box 6327	Amend Divisio	Address Iment Section In of Corporations entre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

orporation

(Name of Corporati	on as currently filed with the Florida De	pt. of State)
13000030869		
(Docur	nent Number of Corporation (if known)	
ursuant to the provisions of section 607.1006, Florids Articles of Incorporation:	a Statutes, this Florida Profit Corporation	adopts the following amendment(s) t
. If amending name, enter the new name of the c	orporation:	
		The new
ume must be distinguishable and contain the word "c lnc.," or Co.," or the designation "Corp," "Inc, chartered," "professional association," or the abbro	" or "Co". A professional corporation	l" or the abbreviation "Corp" name must contain the word
. Enter new principal office address, if applicable	<u> </u>	
Principal office address <u>MUST BE A STREET ADI</u>	DRESS)	
. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
 If amending the registered agent and/or registered new registered agent and/or the new registered 		ame of the
Name of New Registered Agent		* * * * * * * * * * * * * * * * * * *
	(Florida street address)	
	·	
New Registered Office Address:	(City)	, Florida <i>(Zsp Code)</i>
	, ,	100
ew Registered Agent's Signature, if changing Reg hereby accept the appointment as registered agent.		

Signature of New 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; 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> <u>Jo</u>	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>ŞV</u> <u>Şa</u>	ally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	Т	ROBERT WESSON	771 ROCKPORT CT #7
Add			FORT WALTON BEACH, FL
X Remove			32548
2) Change			
Add			
Remove 3) Change			_
Add			
Remove			
4) Change		**************************************	
Add			
Remove			
5) Change	· · · · · · · · · · · · · · · · · · ·		
Add			
Remove			
δ) Change			***************************************
Add			
Remove			

ach additional sheets, if n	ecessary). (Be specific)		
			
		8	
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_			
·····			
· · · · · · · · · · · · · · · · · · ·			
an amendment provides	for an exchange, reclassification, o	er cancellation of issued shares.	
<u>provisions for implementi</u>	ng the amendment if not contained	in the amendment itself:	
(if not applicable, indic	ate N/A)		
<u> </u>			
		-	

.

The date of each amendment(s)	idoption:	, 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 document's effective date on the D	block does not meet the applicable statutory filing requirements, thi epartment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder	action and shareholder
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendmufficient for approval.	ent(s)
	proved by the shareholders through voting groups. The following star each voting group entitled to vote separately on the amendment(s):	lement
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
12/15/2029	1	
Dated		
Signature	J D-f	
(By a c	firector, president or other officer - if directors or officers have not be	een .
	ed, by an incorporator - if in the hands of a receiver, trustee, or other	court
арроп	nted fiduciary by that fiduciary)	
	Daniel Price	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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