

P13000071463

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

1  
L 20 10

Office Use Only



100419064041

11/27/23--01020--018 \*\*35.00

2023-11-27 10:15:01

# Runeight Inc

12159 US Hwy 301 N. Suite 104, Parrish, FL 34219  
Phone: (941) 981-9754 Fax: (941) 776-5655

November 20, 2023

Amendment Section  
Division Of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

## Attention Amendment Section:

This letter is to inform you that we are filing this amendment to update our principal address and our mailing address. Also, to correct our business name by removing the comma and period.

The updated principal address is as follows:

**12159 US Hwy 301 N., Suite 104  
Parrish, FL 34219**

The updated mailing address is as follows:

**14400 Lee Rd  
Wimauma, FL 33598**

The business name corrections is as follows:

**Runeight Inc** - no comma after Runeight and no period after Inc

Please contact me with any questions or concerns by calling the (941)981-9754

Sincerely,



**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Runeight Inc  
DOCUMENT NUMBER: P13000071463

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael T Reed  
Name of Contact Person  
Runeight Inc  
Firm/ Company  
12159 US Hwy 301 N Suite 104  
Address  
Parrish, FL 34219  
City/ State and Zip Code  
runeight@reagan.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael T. Reed at ( 941 ) 776-5585  
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:

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|--|---|--|--|

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

Runcight, Inc.

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

P13000071463

(Document Number of Corporation (if known))

231  
ST  
101

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

Runcight Inc

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

12159 US Hwy 301 N  
Suite 104  
Parrish, FL 34219

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

14400 Lee Rd  
Wimauma, FL 33598.

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent \_\_\_\_\_

(Florida street address)

New Registered Office Address: \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

\_\_\_\_\_  
Signature of New Registered 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.*

**Example:**

Change                    PT      John Doe

Remove                    V        Mike Jones

Add                         SV      Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____

