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(Requestor's Name)	!
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(Business Entity Name)	<del> </del>
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company City/ State and Zip Code For further information concerning this matter, please call: Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

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Articles of Incor	poration	1	17

of the last term of the
Fi lawn: Worke Inc
(Name of Corporation as currently filed within the Florida Dept. of State)
714 0500 DG972
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
N-A
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:
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered of fice address:
Name of New Registered Agent
(lilorida 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

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:

 $P \sim President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer: CFO = Chief Financial Officer If an officer/director holds more than one title, list the first letter of each office held, President, Treasurer, Director would be PTD.$ 

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:	19/1:	John Day		
<u>X</u> Change	PT	John Doe		
X Remove	<u>V</u>	Mike Jones		
<u>X</u> Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address
1) Change	D	Micha	2 RUNNET	31 Nahunta C
Add				Ellijay CA
Remove				30540
2) Change				
Add				
Remove				
3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

11 amending or adding additional Articles, enter cha	nge(s) nere:
(Attach additional sheets, if necessary). (Be specific)	
1	
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	<del></del>
If an amendment provides for an exchange, reclassif	ication, or cancellation of issued shares,
provisions for implementing the amendment if not	contained in the amendment itself:
(if not applicable, indicate N/A)	
1 > 144	
<del></del>	
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The date of each amendment(s) adoption:	5/10/19, if other the
date this document was signed.	
Effective date if applicable:	
(no r	nore than 90 days after amendment file date)
Note: If the date inserted in this block does not med document's effective date on the Department of State's	et the applicable statutory filing requirements, this date will not be listed as records.
Adoption of Amendment(s) (CHECK	ONE)
The amendment(s) was/were adopted by the shareh by the shareholders was/were sufficient for approv	olders. The number of votes east for the amendment(s) al.
☐ The amendment(s) was/were approved by the share must be separately provided for each voting group.	cholders through voting groups. The following statement of entitled to vote separately on the amendment(s):
"The number of votes east for the amendmen	t(s) was/were sufficient for approval
by(voting gr	
(voting gr	oup)
☐ The amendment(s) was/were adopted by the board action was not required.	of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorpaction was not required.	orators without shareholder action and shareholder
Dated 5/0/19	
Signature	
	or other officer – if directors or officers have not been tor – if in the hands of a receiver, trustee, or other court
appointed fiduciary by th	at fiduciary)
D	illan Runner
(Typec	for printed name of person signing)
	Pres
	(Title of person signing)

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