PH000038440

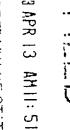
| (Requestor's Name) |
|---|
| |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |
| |
| |
| |

Office Use Only



600406097646

04/13/23--01024--012 **43.75



COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: Pelican Engineerin | g Associates. Inc. | | | |
|---|--|--|---------------|-------------|--|
| DOCUMENT NUMBER: P14000038440 | | | | | |
| The enclosed Articles | The enclosed Articles of Amendment and fee are submitted for filing. | | | | |
| Please return all corre | spondence concerning this ma | tter to the following: | | | |
| John Sokolik | | | | | |
| | Name of Contact Person | | | | |
| | Pelican Engineering Associates. Inc. | | | | |
| | Firm/ Company | | | | |
| | 4584 Mercantile Avenue Suite E | | | | |
| | Address | | | | |
| | Naples, Florida 34104 | | | | |
| | | City/ State and Zip Code | | | |
| john@pelicanengassoc.com | | | | | |
| | E-mail address: (to be us | sed for future annual report notification) | | | |
| For further information concerning this matter, please call: | | | SECR! | 2023 APR 13 | |
| John Sokolik | | at (239) 631-5333 | ₩ | ₹ - | |
| Name of Contact Person Area Code & Daytime Telephone Number | | oer 🗦 | | | |
| Enclosed is a check for | or the following amount made | payable to the Florida Department of State; | CRETAKY OF ST | AM II: 5 | |
| □ \$35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | FATE | 51 | |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303 | | | | | |

Articles of Amendment to Articles of Incorporation of

| Pelican Engineering Associates, Inc. | | |
|--|---|---|
| (Name of Corporation as currently filed | with the Florida Dept. of State) | |
| P14000038440 | | |
| (Document Number of Corpo | ration (if known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> its Articles of Incorporation: | Profit Corporation adopts the following | owing amendment(s) t |
| A. If amending name, enter the new name of the corporation: | | The new |
| name must be distinguishable and contain the word "corporation," "compan". "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional association," or the abbreviation "P.A." | v," or "incorporated" or the abbre ssional corporation name must c | viation "Corp.," |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | 2029 SEC |
| D. If amending the registered agent and/or registered office address in a new registered agent and/or the new registered office address: | Florida, enter the name of the | APR 13 AHII: 5 CRETARY OF STATALLAHASSEE, FL |
| Name of New Registered Agent | | —————————————————————————————————————— |
| (Florida street addr | ess) | |
| New Registered Office Address: (City) | , Florida | (Zip Code) |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and | d accept the obligations of the posi | • |
| NA | | |
| Signature of New Registere | ed 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)

Remove

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 Doc | |
|-------------------------------|-----------|-----------------|------------------------------------|
| X Remove | <u>v</u> | Mike Jones | |
| <u>X</u> Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | <u>s</u> | JUANITA SOKOLIK | 26688 MORTON AVENUE |
| X Add | | | BONITA SPRINGS, FL 34135 |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove 3) Change | | | SECRETARY OF STATEMENT AND SEE, FL |
| Add | | | ATA ATA |
| Remove | | | AH OF |
| 4) Change | | | STA STA FL |
| Add | | | |
| Remove | | | |
| 5) Change | | <u> </u> | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| | | | |

| The date of each amendment date this document was signed | t(s) adoption: 04/10/2023 | , if other than the |
|--|--|------------------------------|
| Effective date if applicable: | 04/01/2023 | |
| | (no more than 90 days after amendment file date) | |
| | this block does not meet the applicable statutory filing requirements, this da he Department of State's records. | te will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/we action was not required. | re adopted by the incorporators, or board of directors without shareholder action | on and shareholder |
| | re adopted by the shareholders. The number of votes cast for the amendment(ere sufficient for approval. | s) |
| | re approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s): | ?ni |
| "The number of votes | s cast for the amendment(s) was/were sufficient for approval | |
| by Charles Spelman | and Derek Cronin | |
| | (voting group) | |
| Dated <u>4/10/</u> | 2023 | |
| Signature | By a director, president or other officer – if directors or officers have not been | |
| | elected, by an incorporator – if in the hands of a receiver, trustee, or other could | 202 SE |
| a | ppointed fiduciary by that fiduciary) | TAL A |
| | John D. Sokolik | SECRETARY OF S TALLAHASSEE. |
| | (Typed or printed name of person signing) | 一方 表 る ! |
| | | AMII: |
| | President (Title - Consequence) | |
| | (Title of person signing) | 51 FAT |
| | | (L) |