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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: C & J CHERRY IN	tc.	
DOCUMENT NUMB			· · · · · · · · · · · · · · · · · · ·
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	JEFFERY CHERRY		
-		Name of Contact Person	1
	C & J CHERRY INC.		
-		Firm/ Company	
	408 NORTH MAIN STREET	-	
•	·	Address	
	TRENTON, FL 32693		
		City/ State and Zip Code	
	jeffcherry73@gmail.com		
-	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
JEFFERY CHERRY		352 at (463-1212
Name of Contact Person		Area Code & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	ortment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	-	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation



C & J CHERRY INC.		2022 NOY -7
(<u>Name of Corporati</u>	on as currently filed with the Florida	Dept. of State)
P14000045117		SECRET
(Docum	ment Number of Corporation (if known)	- FELLINGS
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this <i>Florida Profit Corporatio</i>	on adopts the following amend
A. If amending name, enter the new name of the co	orporation:	
		The i
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbre	" or "Co". A professional corporation	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>	
		
D. If amending the registered agent and/or register new registered agent and/or the new registered		name of the
Name of New Registered Agent		<u> </u>
	(Florida street address)	
New Registered Office Address:	(Ciţi)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	gistered Agent; I am familiar with and accept the oblige	ttions of the position.
	, ,	
Signe	ature of New Registered Agent, if change	ing

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, r 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:

 $P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director, TR = Trustee; C = Chairman or Clerk; CE Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each <math>\epsilon$. 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 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 Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT J</u>	John Doe	
X Remove	<u>V</u> <u>\</u>	Mike Jones	
X Add	<u>sv</u> s	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u>s</u>	SUSAN J CHERRY	408 NORTH MAIN STREET
Add			TRENTON, FL 32693
X Remove 2) Change	<u>s</u>	JESSICA B CHERRY	408 NORTH MAIN STREET
X Add			TRENTON, FL 32693
Remove 3) Change			
Add			
Remove			
4) Change			
Add			·
Remove			
5) Change	<u></u>		
Add			
Remove			
6) Change			
Add			
Remove			

	sheets, if necessary).	(Be specific)			
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		hange, reclassification			
		indment if not contai	ned in the amendm	ent itself:	
provisions for in	adder inchesses M/AX				
	able, indicate N/A)				
provisions for in	able, indicate N/A)				
provisions for in	able, indicate N/A)				
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provisions for in	able, indicate N/A)				

The date of each amendment(s) adoption this document was signed.	otion:, if other
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Note: If the date inserted in this bloc document's effective date on the Department	k does not meet the applicable statutory filing requirements, this date will not be listement of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without shareholder action and sharehold
☐ The amendment(s) was/were adopt by the shareholders was were suffi	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.
	ved by the shareholders through voting groups. The following statement ch voting group entitled to vote separately on the amendment(s):
"The number of votes cast fo	the amendment(s) was/were sufficient for approval
by	
	(voting group)
selected.	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that tiduciary) (Typed or printed name of person signing)
	(Title of person signing)