P15000008105

(Re	equestor's Name)				
(Ac	idress)				
(Ac	idress)				
(Ci	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bı	usiness Entity Nar	ne)			
(Do	ocument Number)				
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PALLAHASSEE, FIND

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	NAMARON CORP	ORATION, INC.		
DOCUMENT NUMBER:	P15000008705			
The enclosed Articles of Amend	ment and fee are sub	omitted for filing.		
Please return all correspondence	concerning this matt	ter to the following:		
SMITH	ГНОМРЅОÑ SHAW	/		
		Name of Contact Person	-	
ATTN: S	TACY SMALL			
		Firm/ Company		
3520 TH	OMASVILLE ROAI	O - 4TH FLOOR		
		Address	_	
TALLAH	TALLAHASSEE, FL 32309			
		City/ State and Zip Code	:	
czig31@a	aol.com			
E-ma	ail address: (to be use	ed for future annual report	notification)	
For further information concerni	ing this matter, pleas	e call:		
STACY SMALL		at (893-4105	
Name of Contact	Person	Area Coo	de & Daytime Telephone Number	
Enclosed is a check for the follo	wing amount made p	payable to the Florida Depa	artment of State:	
<u> </u>	3.75 Filing Fee & rtificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Addr Amendment S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303	

FILED

Articles of Amendment to Articles of Incorporation of

2022 AUG -2 AM 9: 35

	NAMARON CORPORAT	ION, INC.	- SECRETARY OF STATE TALLAHASSEE, FLUM	
(Name of Corp.	oration as currently filed	with the Flor	rida Dept. of State)	
(E	Occument Number of Corp	oration (if kno	wn)	
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	lorida Statutes, this Florid	a Profit Corpo	pration adopts the following amend	imente
A. If amending name, enter the new name of t	the corporation:			
			The i	new
name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the c	"Inc," or "Co". A profe	ny," or "incorp essional corpo	porated" or the abbreviation "Cor pration name must contain the w	p.," ord
B. Enter new principal office address, if appli (Principal office address <u>MUST BE A STREET</u>				_
				_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC.	E BOX)			
D. If amending the registered agent and/or re new registered agent and/or the new regist	gistered office address in ered office address:	Florida, ente	r the name of the	_
Name of New Registered Agent				
	(Florida street add	ress)		
N. B			· ·	
New Registered Office Address:	(City)		, Florida(Zip Code)	_
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag		d accept the o	bligations of the position.	
	Signature of New Register	ed Agent, if ch	hanging	

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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	τ	WILLIAM J. NORMAN	1610 LAGUNA DR.
Add			TALLAHASSEE, FL 32308
X Remove 2) Change	Т	CHRIS ZEIGLER	3614 STROLLING WAY
X Add			TALLAHASSEE, FL 32311
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach a	lditional sheets, if necessary	y). (Be specific)			
					
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D 46					
r. <u>II an an</u>	endment provides for an e ns for implementing the a	xcnange, reclassification	cation, or cancella	tion of issued share	<u>s,</u>
<u>provisi</u> (if	ot applicable, indicate N/A)	ouranted in the att	tenument nacm.	
(7	,	,			

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The date of each amendment(s)	adoption:	, if other than th
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	block does not meet the applicable statutory filing requirements Department of State's records.	s, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the ame sufficient for approval.	endment(s)
	pproved by the shareholders through voting groups. The followin or each voting group entitled to vote separately on the amendmen	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
bу		
,	(voting group)	
Dated	8-1-22 director, president or other officer - if directors or officers have	not been
	ted, by an incorporator – if in the hands of a receiver, trustee, or c	
appo	inted fiduciary by that fiduciary)	
	HALLIE D. ZEIGLER	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	