## P150000 15472

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: J. PETER BEGALLA, INC.  DOCUMENT NUMBER: P15000015472	
The enclosed Articles of Amendment and fee are submitted for filling.	
Please return all correspondence concerning this matter to the following:	
JOSEPH PETER BEGALLA  Name of Contact Person  J. PETER BEGALLA. INC.  Firm/ Company  210 W. WASHINGTON AVE  Address  DELAND, FL 32720  City/ State and Zip Code  PLANLA & QUOVISTA, COM  E-mail address: (to be used for future annual report notification)	_
For further information concerning this matter, please call:	
PETER BEGALLO at (386), 785 7850  Name of Contact Person Area Code & Daytime Telephone Num	ber
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  \$35 Filing Fee Certified Copy (Additional Copy is enclosed)  \$35 Filing Fee Certified Copy (Additional Copy is enclosed)	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to

## Articles of Incorporation of

J. PETER BEGALI	s currently filed with the Florida Dept. of State)
(Name of Corporation a	s currently filed with the Florida Dept. of State)
P15000015472	-
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Staits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	ration:
JPB CONSULTING GR	LOUP, INC The new
name must be distinguishable and contain the word "corpo "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviate	The new ration," "company," or "incorporated" or the abbreviation "Corp" "Co". A professional corporation name must contain the word ion "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u>	<u>SS</u> )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office.	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I an	
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 = 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	V	Mike Jones		
X Add	<u>\$V</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change		- , <del> </del>		
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				
Page 2 of 4				
E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				

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F. If an amendment provides for an exchan provisions for implementing the amend (if not applicable, indicate N/A)	ge, reclassification, or one ment if not contained in	cancellation of issued shares.  the amendment itself:	1
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	Page 3 of 4		
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		2 - 2 -	
The date of each amendment(s) adoption: _ date this document was signed.	FEB 1st	2020	, if other than th
Efficient on Assert 10 - 11 - 11 - 12	B 1st 202	7 🐟	
Effective date if applicable: FE	(no more than 00 days	s after amendment file date)	

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. ufficient for approval.	The number of votes cast for the amendment(s)
		through voting groups. The following statement I to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was	/were sufficient for approval
by	(voting group)	
	(voting group)	
action was not required.		tors without shareholder action and shareholder without shareholder action and shareholder
Dated of o	7/2020	<del></del>
(By a d selecte		officer – if directors or officers have not been in the hands of a receiver, trustee, or other court lary)
	Joseph Pe (Typed or prin	TEX. BEGALLA  ted name of person signing)
	PRESIDENT (Title of person signing)	CEO