P15000027120

(Requestor's Name)
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R. WHITE 127 09 2019



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 27, 2019

SYLVIE S. PRIVAT 1751 NE PINE ISLAND RD STE 155 CAPE CORAL, FL 33909

SUBJECT: TEPP I INVESTORS INC.

Ref. Number: P15000027120

We have received your document for TEPP I INVESTORS INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist III

Letter Number: 919A00006135

Thank you for your help during for meperind Forme-Sylick,

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2019 APR -5 PH 12: 05
TA

www.sunbiz.org

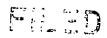
COVER LETTER

TO: Amendment Section Division of Corporations

•

NAME OF CORPORA	TEPP I INVESTOR	RS INC	
DOCUMENT NUMBE	:R: P15000027120		
	*Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
S	YLVIE PRIVAT		
_		Name of Contact Person	<u> </u>
Т	EPP I INVESTORS INC		
_		Firm/ Company	
1.	751 NE PINE ISLAND RD	STE #155	
-		Address	
C	APE CORAL FL 33909	•	
_		City/ State and Zip Code	
agfinve	stusa@gmail.com		
-	-	sed for future annual report	notification)
For further information	concerning this matter, pleas	se cali:	
Sylvie PRIVAT		239	227-0261
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment of State:
□ \$35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. I	ng Address dment Section on of Corporations 30x 6327 nassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of



to

(Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) ursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendme staticles of Incorporation: . If amending name, enter the new name of the corporation: The new time 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 ord "chartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable; "rincipal office address MUST BE A STREET ADDRESS.) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida	TEPP I INVESTORS INC	2019 APR -8 PM 2: 05
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Name of New Registered Agent (Florida street address) New Registered Office Address: Florida		
(Florida street address) New Registered Office Address: Florida		
New Registered Office Address: Florida	Name of New Registered Agent	
New Registered Office Address: Florida		
	(Florid	la street address)
$\{ClV\}$	New Registered Office Address:	
(inp cours)		(City) (Zip Code)
(in cost)	{Floria	Florida
	New Registered Agent's Signature, if changing Registered Agent be appointment as registered agent. Lam family	Rent: liar with and accept the obligations of the position
ew Registered Agent's Signature, if changing Registered Agent:	польоз посері те пррочитет из гезімегей азет. Тит зати	an wan and accept the obligations of the position.
ew Registered Agent's Signature, if changing Registered Agent: sureby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		
ew Registered Agent's Signature, if changing Registered Agent: nereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		
nereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	Signature of No	ew 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.

X Change	PI	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l)Change	P	GUY R BRIOLET	Deceased
Add			
X Remove			
2) X Change	P	SYLVIE S PRIVAT	1751 NE PINE ISLAND RD
Add			STE 155
Remove			CAPE CORAL FL 33909
3) Change	ST	MARIA KALAPATI	1381 NIMBUS DR
X Add			NORTH PORT FL 34287
Remove			
4) Change		_	_
Add			
Remove			
5) Change		_	
Add			
Remove			
б) Change			_
Add			
Remove			

. transcription birector y recommendation y/	ticles, enter change(s) here: . (Be specific)	
		_
_		
_		
		
f an amondment provides for an ex	change, reclassification, or cancellation of issued sha	res,
provisions for implementing the an	nendment if not contained in the amendment itself:	
Provident for implementations life in		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		

• • •	03/01/2019	
The date of each amendment(s) ado	otion:	, if other than the
date this document was signed.		
03/01/	2019	
Effective date if applicable:	(no more than 90 days after amendment file da	ue)
Note: If the date inserted in this blo document's effective date on the Depa	ck does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the accient for approval.	mendment(s)
	ved by the shareholders through voting groups. The follow sch voting group entitled to vote separately on the amendm	
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and	i shareholder
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shar	reholder
Dated OU/OS	115019 HOUST	
(By a dire selected,	ctor, president or other officer – if directors or officers hav by an incorporator – if in the hands of a receiver, trustee, or fiduciary by that fiduciary)	
_	Sylvie TRIVAT Typed or printed name of person signing)	
_	Resident	
	(Title of person signing)	