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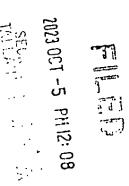
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## COVER LETTER

Division of Corporations
NAME OF CORPORATION: VICTORY INVESTMENT Advisors Inc.
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mark A - Cohren Name of Contact Person
Victory Truestnest Lavisor S. In C.
2699 NE 25th Terrace
Bola Raton, fl 3343)
City/ State and Zip Code  CMCM7777 & Amail-Com
E-mail address: (to be used for future annual report notification)  CNCV 7777009ms.
For further information concerning this matter, please call:
Mark A Cohen a1, 561, 706-3809
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State: $X = A$
S35 Filing Fee  Certificate of Status  Certified Copy (Additional copy is enclosed)  S43.75 Filing Fee & S52.50 Filing Fee  Certificate of Status (Additional copy is enclosed)

**Mailing Address** 

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment

to
Articles of Incorporation
of

01	1-A-Juica Than	
Victory = I-nuestmen	1-1-12V13EV5-1-1C	
	tly filed with the Florida Dept. of State)	
P15000555	<del>- 120</del>	
(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:    A. If amending name, enter the new name of the corporation:   A. If amending name,	Bridge Asset Hanagement  The  Company, "or "incorporated" or the abbreviation "Co  A professional corporation name must contain the	new orp.,"
(Trincipal office address sites to A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1023 OCT -5 FILE	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	dress in Florida, enter the name of the	17: 08 17: 08
Name of New Registered Agent	<u> </u>	Ø
(Florida si	Arect address)	
New Registered Office Address:	Florida	_ <del></del> .
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar  Signature of New 1		
Check if applicable		

 $\Box$  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)

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>	<u>John Do</u>	n <u>e</u>	
X Remove	<u>V</u>	Mike Joi	<u>nes</u>	
_X Add	<u>sv</u>	Sally Sn		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		<del>_</del>		
Add				
Remove				
2) Change	<del></del>	_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
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Remove				
5) Change		<del></del>		
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6) Change		_		
Add				
Remove				

	(Be specific)
<u>-</u>	
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f an amandmant provides for an ave	hange reclassification or cancellation of issued charge
f an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
f an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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The date of each amendment(s) adoption:  9/25/2023  if other than the date this document was signed.
Effective date if applicable: 9/25/3653  (no more than 9t days 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 adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by"
(voting group)
Signature  (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Mark A. Colon (Typed or printed name of person signing)
(Title of person signing)