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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	N: Winningham and I	Pospichal, Inc.	
DOCUMENT NUMBER:	215000080380		
The enclosed Articles of Amo		bmitted for filing.	
Please return all corresponde	nce concerning this ma	tter to the following:	
Randa	ll Kyle Winningham		
<u> </u>		Name of Contact Persor	
Winni	ngham and Pospichal,	Inc.	
		Firm/ Company	
65 3rc	Street NW	, ,	
		Address	
Winte	r Haven, FL 33881		
		City/ State and Zip Code	
rkyle.	winningham@gmail.co	m	
E	-mail address: (to be us	sed for future annual report	notification)
For further information conce	erning this matter, plea	se call:	
Randall Kyle Winningham		at (⁸⁶³	268-5914 de & Daytime Telephone Number
Name of Con	act Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the fo	dlowing amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee]\$ 43.75 Filing Fee & Certificate 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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

led with the Florida Dept. of State) orporation (if known) rida Profit Corporation adopts the fol	RY OF SHAPE lowing a	-8 AM 10: 50	
orporation (if known)		10: 50	D
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			nent(s) to
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pany," or "incorporated" or the abbre cofessional corporation name must c	eviation	"Corp.	, • ,
			
P.O. box 102			
Vinter Haven, FL 33882			
in Florida, enter the name of the			
E			
address)			
Florida 33	881		
	(Zip Cod	le)	-
	P.O. box 102 Vinter Haven, FL 33882 in Florida, enter the name of the E address) Florida_33 y) and accept the obligations of the pos	pany, "or "incorporated" or the abbreviation refessional corporation name must contain to P.O. box 102 Winter Haven, FL 33882 in Florida, enter the name of the Enddress) Florida	in Florida, enter the name of the E address) Florida 33881 (Zip Code) and accept the obligations of the position.

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	
\underline{X} Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Eric S Pospichal	292 Magneta Loop
Add			AUBURNDALE, FL 33823
X Remove			
2) Change		_	
Add			
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<u>-</u>		
Add			
Remove			

	additional sheets, if necessar	Articles, enter change(y). (Be specific)			
	-				
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			ion or concellation of is	cuad charac	
fana	mendment provides for an	sychange reclassificat			
lf an a	mendment provides for an	exchange, reclassificat	ained in the amendment	t itself:	
provis	sions for implementing the :	amendment if not cont	ained in the amendment	t itself:	
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• • • • •

	4/6/2022	
The date of each amendment(s) addate this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after t	amendment file date)
Note: If the date inserted in this b document's effective date on the De		bry filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of dire	ectors without shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of flicient for approval.	votes cast for the amendment(s)
	roved by the shareholders through voting each voting group entitled to vote separate	
"The number of votes cast	for the amendment(s) was/were sufficient	for approval
by		
,	(voting group)	
Dated		
Signature	7. Klw/	
selecte	rector, president or other officer – if direct d, by an incorporator – if in the hands of a ed fiduciary by that fiduciary)	
	Randall Kyle Winningham	
	(Typed or printed name of pers	son signing)
	Director	

(Title of person signing)