PITCCCO 21444

| (Requestor's Name) |
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| |
| (Address) |
| |
| (Address) |
| (0)-10-1-1 |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

TO: Amendment Section Division of Corporations

| 1217 (3) (0) (0) | porations | | 7320 . The state of the state o | 2.75 |
|------------------------|---|--|--|-------------|
| NAME OF CORPO | ORATION: Green Family Co | onsulting \ \(C | £J£9 . 1 | Z+ C |
| | IBER: P17000021444 | | | |
| | es of Amendment and fee are su | bmitted for filing. | | |
| Please return all corr | espondence concerning this ma | tter to the following: | | |
| | William Green | | | |
| | · | Name of Contact Per | son | |
| | Green Family Consulting | INIC | | |
| | _ | Firm/ Company | | |
| | 1879 Manitoba Ct S | | | |
| | | Address | | |
| | Middleburg, FL, 32068 | | | |
| | | City/ State and Zip C | ode | |
| | Jessica@greeninsagency. | com | | |
| | E-mail address: (to be us | sed for future annual rep | ort notification) | |
| For further informati | on concerning this matter, pleas | se call: | | |
| William Green | | at (| 2349634 | |
| Name | e of Contact Person | Area (| Code & Daytime Telephone Nun | nber |
| Enclosed is a check t | for the following amount made | payable to the Florida D | epartment of State: | |
| S35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| | ailing Address | | et Address | |
| | nendment Section vision of Corporations | | endment Section | |
| |). Box 6327 | | sion of Corporations Centre of Tallahassee | |
| | llahassee, FL 32314 | | 5 N. Monroe Street, Suite 810 |) |
| | | | ahassee, FL 32303 | |



June 20, 2020

WILLIAM GREEN 1879 MANITOBA CT S MIDDLEBURG, FL 32068

SUBJECT: GREEN FAMILY CONSULTING INC

Ref. Number: P17000021444

We have received your document for GREEN FAMILY CONSULTING 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):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

If the corporation is a **PROFIT** corporation it must be signed 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.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 220A00012238

Articles of Amendment to Articles of Incorporation of

| Green | Family | Consulting | i | MC |
|-------|--------|------------|---|----|
|-------|--------|------------|---|----|

| (Name o | of Corporation as currently | filed with the Florida Dept. | of State) | |
|---|--|---|--------------------------|-------------|
| P17000021444 | | | | |
| | (Document Number of | Corporation (if known) | | |
| Pursuant to the provisions of section 607, its Articles of Incorporation: | 1006, Florida Statutes, this I | Florida Profit Corporation ado | pts the following amenc | lment(s) to |
| A. If amending name, enter the new na | ame of the corporation: | | | |
| Green Insurance Agency COCP | | | The i | new |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association." | Torp," "Inc," or "Co". A | ompany," or "incorporated" of professional corporation nar | r the abbreviation "Corp | p., " |
| B. Enter new principal office address, | if applicable: | 1879 Manitoba Ct S | | |
| | (Principal office address MUST BE A STREET ADDRESS) | | | |
| C. Enter new mailing address, if apple (Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent | od/or registered office address: v registered office address: Jessica Green 1879 Manitoba Ct S | | e of the | |
| | tFlorida stre | vet address) | 32068 | |
| New Registered Office Address: | | (City) | Florida (Zip Code) | |
| New Registered Agent's Signature, if c I hereby accept the appointment as regist Check if applicable | ered agent. I am familiar w | | of the position. | |
| ☐ The amendment(s) is/are being filed p | ursuant 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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| Example: X Change | <u>PT</u> | John Doe | |
|----------------------------|--------------------------|---------------|-----------------------|
| X Remove | $\underline{\mathbf{V}}$ | Mike Jones | |
| <u>X</u> Add | _ <u>\$V</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | Address |
| 1) Change | Р | Jessica Green | 1879 Manitoba Ct S |
| X Add | - | | Middleburg, FL, 32068 |
| Remove | | | |
| 2) X Change | VP | William Green | 1879 Manitoba Ct S |
| Add | | | Middleburg, FL, 32068 |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | **** |
| 4) Change | | _ | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| б) Change | | _ | |
| Add | | | |
| Remove | | | |

| | doption: | , if other than the |
|---|---|--|
| | mediate | |
| Effective date if applicable: | (no more than 20 deys after amendment file date | <i>c)</i> |
| Note: If the date inserted in this document's effective date on the D | plock does not meet the applicable statutory filing requirement of State's records. | nts, this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were ad action was not required. | opted by the incorporators, or board of directors without share | holder action and shareholder |
| ☐ The amendment(s) was/were ad by the shareholders was/were s | opted by the shareholders. The number of votes east for the ar afficient for approval. | nendment(s) |
| • | proved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendment | • |
| "The number of votes cas | for the amendment(s) was/were sufficient for approval | |
| by | | |
| | (voting group) | |
| sorecte | irector, president or other officer – if directors or officers have d, by an incorporator – if in the hands of a receiver, trustee, or ted fiduciary by that fiduciary) | |
| a _l , _l , on | | |
| | (Typed or printed name of person signing) | |
| | President | |
| | (Title of person signing) | |