## P17000064147

(Requestor's Name)  (Address)	
(Address)	200347275352
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	07/06/2001016029 **/3.75
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	2020 301.
Special Instructions to Filing Officer:	2020 J.J & PH12: 50
	50

Office Use Only

AUI . WILL

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: S S & S Industries	, Inc.	
DOCUMENT NUME			
	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	pondence concerning this ma	itter to the following:	
	Deborah L Messenger		
		Name of Contact Perso	n
	S S & S Industries, Inc.		
	620 Di Lido Street NE	Firm/ Company	
		Address	
	Palm Bay, FL 32907		
-		City/ State and Zip Cod	c
	Debbie@sssil.com		
•	E-mail address: (to be us	sed for future annual report	notification)
For further information Debbic Messenger	concerning this matter, please	se call:	327-2500
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made		-
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section in of Corporations entre of Tallahassee J. Monroe Street, Suite 810 issee, FL 32303

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently flied with the Florida Dept. of State)  Pirouant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to starticles of Incorporation:  A. If amending name, enter the new name of the corporation:  The new name 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 word "chartered." "professional societain," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing 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: (City (City) (Zip Code)  Signature of New Registered Agent, if changing Foundations of the position.	S S & S Industries, Inc.	
(Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  The new name 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 word "chartered." "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address:  Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City)  (City)		ntly filed with the Florida Dept. of State)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation.  A. If amending name, enter the new name of the corporation:  The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp" "Inc." or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address:  Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City)  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		of Corporation (if known)
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp" "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. 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:  (City)  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	Pursuant to the provisions of section 607.1006, Florida Statutes, thi	
name 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 word "chartered," professional association, or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. 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:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	A. If amending name, enter the new name of the corporation:	
"Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered." "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address MAY BE A POST OFFICE BOX)  D. 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:  (City)  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent: 1 am familiar with and accept the obligations of the position.		
(Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. 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:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	"Inc.," or Co.," or the designation "Corp," "Inc," or "Co".	A professional corporation name must contain the word
D. 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: (City) (Zip Code)   New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		
D. 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: (City) (Zip Code)   New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		2029
D. 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: (City) (Zip Code)   New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	C. Enter new mailing address, if applicable:	ا المسلمة المس المسلمة المسلمة المسلم
Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City)  New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	(Mailing address MAY BE A POST OFFICE BOX)	
Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City)  New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		
Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City)  New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		= = =
Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (City)  New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		<u>`</u>
(Florida street address)  New Registered Office Address:	D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	dress in Florida, enter the name of the
New Registered Office Address:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	Name of New Registered Agent	
New Registered Office Address:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		
(City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	(Florida s	treet address)
(City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	New Registered Office Address	Florida
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position,	The Magnetia Office Man 135.	
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position,		
Signature of New Registered Agent, if changing	New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	nt: r with and accept the obligations of the position,
	Signature of New	Registered Agent, if changing
Charle if applicable		
Check if applicable  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	• •	) (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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>şv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	ST	Michael E Messenger	620 Di Lido St NE
Add			Palm Bay, FL 32907
Remove			·····
2) Change	VP	Michelle L Rider	1477 Huff Court
Add			Melbourne, FL 32935
x Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			_
Remove			
6) Change			
Add		· · · · · · · · · · · · · · · · · · ·	
Remove			

	additional sheet	ts, if necessary).	icles, enter chang (Be specific)	<u> </u>		
				_		
<del></del>	<del></del> -			···		
<del></del>		<del></del>				
						· ·
		<del></del> · ·	<del> </del>			<del> </del>
			<u> </u>			
	<del></del>					
	<del></del>	<del></del>		<del></del>	-	
			<del>, , , , , , , , , , , , , , , , , , , </del>			<u> </u>
	<del></del>					
	<del></del>					
<u>provisio</u>	nendment provi ons for implem not applicable,	penting the amen	ange, reclassifica adment if not con	tion, or cancella tained in the an	tion of issued sh nendment itself:	ares,
(if i		, .				
(if i						
(if t				<u> </u>	· , •,-	
(if i						
(if i						
(If i						
(if i						
(if i						

	05-01-2020		
The date of each amendment(s) ac	option:		, if other than the
date this document was signed.			
Effective date <u>if applicable</u> :			
	(no more than 90 days aj	fter amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable state artment of State's records.	tutory filing requirements, this date with	Il not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were ado action was not required.	ted by the incorporators, or board of	directors without shareholder action and	i shareholder
■ The amendment(s) was/were ado by the shareholders was/were su	ted by the shareholders. The number icient for approval.	r of votes east for the amendment(s)	
	oved by the shareholders through voti ach voting group entitled to vote sepa	ting groups. The following statement arately on the amendment(s):	
	or the amendment(s) was/were suffici	ient for approval	
by 3		••	
· · · · · · · · · · · · · · · · · · ·	(voting group)	·	
06-19-90 Dated	what Mess	engre	
(By a directed	ector, president or other officer - if di by an incorporator - if in the hands of	irectors or officers have not been	
	I fiduciary by that fiduciary)	of a receiver, trustee, or other court	
;	fiehel-Messenger Michael Messe	enger	
-	(Typed or printed name of p	person signing)	
:	ecretary / Treasurer		
-	(Title of person signing)		

...