# P17000 067 473

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(2.0
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700333102887

08/16/19--51009 219 \*\*70.00

SECRETARY OF STATE

FILED

MESTITEDER PSOMPOEDER

### **COVER LETTER**

Division of Corporations SAVINGS Group Inc. NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: **\$43.75** Filing Fee & **□\$43.75** Filing Fee & \$52.50 Filing Fee ☐ \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(Additional Copy

is enclosed)

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently	filed with the Florida Dept. of State)
SAVINGS Group Inc.	017000067407
(Document Number of C	Corporation (if known)
(Document Number of C	Surporation (it known)
tursuant to the provisions of section 607.1006, Florida Statutes, this $F$ is Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
. If amending name, enter the new name of the corporation:	
	The new
ame must be distinguishable and contain the word "corporation, Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cord "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must contain the
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS	
,	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	<u> </u>
	55 <u>- 1</u>
. If amending the registered agent and/or registered office addre	ss in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent 7/1/46.	10 ( = 57 P
5283 TAY/01/2 (Florida stree	Landing (1. Middlehung H. 30
Man Thui	1.01 00:116hua 37014
New Registered Office Address: 3285   A YlorsLaw	dus (7. // scale 7. Florida 000 0
(0	C(y) (Zip Code)
lew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar wi	ith and accept the obligations of the position.
\i\	
of the state of th	
Signature of New Re	gistered 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.

Mike Jones, V as Kemovi	e, and Sauy Sm	uth, SV as an Ada.	
Example: X Change	PT Joh	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
_X Add	SV Sall	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change	UP	Chadwick R Mallby	5283 TAYlors
Add			Lardy (+. 3206
Remove			
2) Change			<del></del>
Add			
Remove			
3 ) Change			A A A A A A A A A A A A A A A A A A A
Add			S\$ 6
Remove			
4) Change			0: 50 PATE
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)		
		-	
· · · · · · · · · · · · · · · · · · ·			
		<del></del>	
		•	
		<del></del>	
			-
· ··· · · · · · · · · · · · · · · · ·			
		2 C	19
			AUG
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,	1.5	<u>5</u>
provisions for implementing the amei	ndment if not contained in the amendment itself:	<b>込</b> れ 円光	91
(if not applicable, indicate N/A)		T-07	-
			0
		70 N N N N N N N N N N N N N N N N N N N	50
		<u>&gt;</u>	

The date of each amendment(s) adoption: 8-449  date this document was signed.	, if other than the
Effective date if applicable:  (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will redocument's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	19
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.  Dated    Dated   Grain   G	FILED
(Title of person signing)	<del></del>

١