# P17000074852

(Re	questor's Name)			
(Ad	dress)			
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(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
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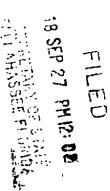




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## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: Florida Transportation a Development Conf. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ransportation 4 Development MI, FL 33018
City/ State and Zip Code be used for future annual report notification For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □S43.75 Filing Fee & □\$52.50 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**

# Articles of Incorporation

of

	evelopment corp.	
(Name of Corporation as currently	filed with the Florida Dept. of State)	
P1700007486	52	
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	'lorida Profit Corporation adopts the following amendment(s)	to
A. If amending name, enter the new name of the corporation:  All Florida Develop  name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Coword "chartered," "professional association," or the abbreviation "F	Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	12321 NW 154st Unit 102 Hiateah Garden, FL 330	
D. If amending the registered agent and/or registered office addre	ess in Florida, enter the name of the	
new registered agent and/or the new registered office address:		
Name of New Registered Agent		
(Florida stree	et address)	
New Registered Office Address:	City) Florida (Zip Code) P	I
Now Double and Agent's Country of the start Desire and Assess		

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.

Signature of New Registered 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.

X Change	PT	John Doc	
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			<del> </del>
Add			<del></del>
Remove			
2) Change			
Add			
Remove			-1.
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	
·		
<u></u>		
765		
f an amendment provides for an exch provisions for implementing the ame	ange, reclassification, or cancelled	ation of issued shares, mendment itself:
(if not applicable, indicate N/A)		
Committee and the control of the con		
(J 1711)		
.,		

The date of each amendment(s) and date this document was signed.	doption:	9 24	118	, if other than the
Effective date if applicable:				
Enecuve date in applicable.	(no mo	re than 90 days afte	r amendment file de	ite)
Note: If the date inserted in this bedocument's effective date on the De			ory filing requirem	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ON	NE)		
☐ The amendment(s) was/were add by the shareholders was/were su		lers. The number o	f votes east for the a	imendment(s)
☐ The amendment(s) was/were app must be separately provided for				
"The number of votes cast	for the amendment(s)	was/were sufficien	t for approval	
by	(voting group	···		
	(voting group	")		
☐ The amendment(s) was/were add action was not required.	opted by the board of	directors without sh	areholder action an	d shareholder
The amendment(s) was/were add action was not required.	opted by the incorpora	ators without shareh	older action and sha	ıreholder
Dated	9/24/18	<del></del>		
Signature				
(By a d	inector, president or o			
	<ul> <li>d. by an incorporator ted fiduciary by that f</li> </ul>		a receiver, trustee, (	or other court
		triel N	unez	
	(Typed or	printed name of pe	rson signing)	
		Presid	ent	
		(Title of person s	ionino)	<del></del>