

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

Office Use Only



100304236431

100304236431 10/05/17--01008--014 \*\*35.00

OCT 1 1 2017 S. YOUNG FILED

17 OCT 11 FM 2: 19

SIGNETARY OF STATE
JALLANASSECTELORIDA



## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 6, 2017

BLANCA MICHAELS ANDREW'S FLOWERS ON 4TH INC. 6101 4TH STREET NORTH ST PETERSBURG, FL 33703

SUBJECT: ANDREWS FLOWERS ON 4TH ST. INC.

Ref. Number: P17000077161

We have received your document for ANDREWS FLOWERS ON 4TH ST. 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):

CANNOT USE PROFIT BENEFIT FORM

We are enclosing the proper form(s) with instructions for your convenience.

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.

Letter Number: 717A00020210

Shelia H Young Regulatory Specialist II

www.sunbiz.org

## COVER LETTER

. .

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ANDREW	"S FLOWERS ON 4TH, INC.
DOCUMENT NUMBER: P17000077161	
The enclosed Articles of Amendment and fee ar	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
BLANCA MICH.	AELS
	Name of Contact Person
ANDREW'S FLO	WERS ON 4TH, INC.
<del></del>	Firm/ Company
6101 4TH ST. N	IO.
<del></del>	Address
ST. PETERSBUR	RG, FL 33703
	City/ State and Zip Code
ANDREWSFLORISTON	4TH@GMAIL.COM
	e used for future annual report notification)
,	•
For further information concerning this matter, p	lease call:
BLANCA MICHAELS	at ( 727 521-3562
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	de payable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee Certificate of Statu	
Mailing Address Aintingment Section Division of Corporations P.O.B. 6327 Till Market, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

ANDREW'S FLOWERS ON 4TH, INC.

(Name of	Corporation as currently	filed with the Florida Dept. of State)	
P17000077161			
	(Document Number of	Corporation (if known)	_
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this I	Florida Profit Corporation adopts the following amendment(s	i) t
A. If amending name, enter the new nar	ne of the corporation:		
ANDREW SELOWERS ON 4TH, IN	a Androws	Flowers on 4th Inc. The new	
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associati	iin the word "corporation tion "Corp," "Inc," or "C	t," "company," or "incorporated" or the abbreviation 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> )		6101 4TH ST. NO.	
		ST. PETERSBURG, FL 33703	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		6101 4TH ST. NO.	
		ST. PETERSBURG, FL 33703	
		golas isten	
D. If amending the registered agent and new registered agent and/or the new			
Name of New Registered Agent	ANDREW N. MICHAE	LS II	
Mante of New Registered Agent	6101 4TH ST. NO.		
-	(Florida stre	et address)	7
New Registered Office Address:	ST. PETERSBURG, FL	, Florida 3370 = F	Ξ
New Registered Office Address.	·	City) - City Gride)	1
		・	,
New Registered Agent's Signature, if chi I hereby accept the appointment as register	anging Registered Agent: red agent. I am familiar w	ith and accept the obligations of the position.	
	Induws Wint	rail II	

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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	e end fith, Baue, and
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change		KAREN JONES	6101 4TH ST NO. A street of the control of the cont
Add X Remove			ST. PETERSBURG, FL/337036 (*) There is
2) Change	VP	ANDREW N. MICHAELS II	6101 4TH ST. NO.
X Add			ST. PETERSBURG, FL 33703
Remove			
3 ) Change	<del></del>		
Add			25703
Remove			· · · · · · · · · · · · · · · · · · ·
4) Change			
Add			
Remove			- 1, 1, 3, 3, 40
5) Change		_	
Add			· ·
Remove			
6) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			· · ·

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	-
REMOVE KAREN JONES AND ADD ANDREW N. MICHAELS II AS VP	
	<del> </del>
	<del></del>
	••
	<del></del>
	·
	. •
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	
	<del></del>

	SEPTEMBER 28, 2017	
The date of each amendment(s	) adoption:	_, if other than the
date this document was signed.	COMPENSOR AS AS A	
Effective date if applicable:	SE[TEMBER 28, 2017	
<u></u>	(no more than 90 days after amendment file date)	<del></del>
	is block does not meet the applicable statutory filing requirements, this date will Department of State's records.	not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	Cathorn Const.
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	est be listed ex the
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
OCT Dated	10, 2017	
(By sele	director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	_
	Blanca Michaels (Typed or printed name of person signing)	
	(Title of person signing)	