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TALLAHASSIGFE

OCT 15 2019

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	TION:	orporated	
DOCUMENT NUMBE	R:		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
К	elly Luplow		
_	<del>.</del>	Name of Contact Person	n
E	versole Sales, Incorporated		
		Firm/ Company	
50	146 Harbour Drive		
		Address	
. ()	xford, FL 34484		
_		City/ State and Zip Cod	e
kluplow	a lakesidelandings.net		
<del>`</del>	<del>-</del>	sed for future annual report	notification)
	concerning this matter, pleas		220, 1205
Kelly Luplow	// D	at ( <u>352</u>	
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a cheek for t	he following amount made [	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ameno Divisio P.O. B	ng Address Imem Section on of Corporations ox 6327 assee, FL 32314	Ameno Divisio Clifton 2661 F	Address Iment Section on of Corporations Building Executive Center Circle USSEC, FL 32301

## Articles of Amendment to Articles of Incorporation

of

Eversole Sales Incorpoarated	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P17000088624	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following a its Articles of Incorporation:	mendi
A. If amending name, enter the new name of the corporation:	,
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbit "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co" A professional corporation name must conword "chartered," "professional association," or the abbreviation "P A."	he no cyiatie itain ti
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:	2019-SEP-30
new registered agent and/or the new registered office address:	1
Name of New Registered Agent	1-2:1
(Florida street address)	.~
New Registered Office Address: , Florida	le)
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	

P = President; V= Vie Executive Officer; CF held, President, Treass Changes should be no	valirector title by ice President; T= O = Chief Finar weer, Director we ited in the followi leaves the corpo	icial Officer. If an officer/director bould be PTD. Ing manner. Currently John Doe is l ration, Sally Smith is named the V an	ctor; TR= Trustee; C = Chairman or Clerk; CEC holds more than one title, list the first letter of ec- listed as the PST and Mike Jones is listed as the V. nd S. These should be noted as John Doe, PT as a
X Change	<u>PT</u> <u>Joh</u>	n Doe	
$\underline{X}$ Remove	<u>V</u> <u>Mı</u>	se Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	JY P	Kelly Eversole	5046 Harbour Drive, Oxford, FL 34
Add			
Remove			
2) X Change	P	Kelly Luplow	5046 Harbour Drive, Oxford, FL 34
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change	<del> </del>		
Add			
Remove			
			l

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, no

address of each Officer and/or Director being added:

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
<ul> <li>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;</li> </ul>	
(if not applicable, indicate N/A)	
7	

The date of each amendment(s) ad	option:	_, if othe
date this document was signed.		
Effective date if applicable:	9/15/19	
	tno more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will i partment of State's records.	not be list
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) efficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendmentts):	
"The number of votes east	for the amendment(s) was/were sufficient for approval	
bv	<del>."</del>	
•	(voting group)	
☐ The amendment(s) was were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated		1
Signature	111 Sundon	
By a di	rector, president or other officer—if directors or officers have not been I, by the incorporator—if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	-
	Kelly Luplow	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	İ