## P18000002609

(Requestor's Name)	
(Address)	8
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	C
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Special Instructions to Filing Officer:	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Ratcliff Welding In	ıc.		
DOCUMENT NUMB	ER: P18000002609			
	of Amendment and fee are sub	omitted for filing.		
Please return all corres	pondence concerning this mat	ter to the following:		
	Frank Rateliff			
-		Name of Contact Person		
	Rateliff Welding Inc.			
-		Firm/ Company		
	1105 Simonton St.			
-		Address		
	Key West, FL 33040			
•		City/ State and Zip Code	2	
	ratcliffweldinginc@yahoo.co	m		
-		ed for future annual report	notification)	
For further information concerning this matter, please call:				
Frank Rateliff	<u> </u>	at (		
Name o	of Contact Person	Area Coo	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divi: P.O.	ling Address ndment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303	

## Articles of Amendment to Articles of Incorporation of

Ratcliff Welding, Inc.			
(Name o	of Corporation as current	ly filed with the Florida l	Dept. of State)
P18000002609			
	(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporatio	on adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co", or the abbreviation "P.A.	A professional corporation	ted" or the abbreviation "Corp.,"
B. Enter new principal office address, (Principal office address MUST BE A S			
(Control of the control of the contr	<u> </u>		\
			P
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)		N/A	<u>क</u> स्र 
D. If amending the registered agent an new registered agent and/or the new			name of the
Name of New Registered Agent	N/A		
	(Florida st	reet address)	
	N/A	.,	
New Registered Office Address:		(City)	, Florida (Zip Code)
		. ,	•
New Registered Agent's Signature, if of thereby accept the appointment as registed.			ttions of the position.
	Signature of New 1	Registered Agent, if changi	<u> </u>
Check if applicable	g	Commence of the second	·

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (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)

Example:

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	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
<u>X</u> Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) X Change	Р	_	Maria Ratcliff	16 Emerald Dr, Key West, FL
Add				33040
Remove				16 Emerald Dr. Key West, FL
2) X Change	VP	_	Frank Ratcliff	33040
Add				
Remove 3) Change		_	<del></del>	
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add			<del></del>	
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
<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)
N/A
<del></del>

•

	11/13/2020	
The date of each amendmendate this document was signed		_, if other than the
-	11/13/2020	
Effective date <u>if applicable</u> :	: (no more than 90 days after amendment file date)	<del></del>
	n this block does not meet the applicable statutory filing requirements, this date will the Department of State's records.	not be listed as the
Adoption of Amendment(s)	) (CHECK ONE)	
☐ The amendment(s) was/w action was not required.	vere adopted by the incorporators, or board of directors without shareholder action and	shareholder
	were adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
	were approved by the shareholders through voting groups. The following statement ided for each voting group entitled to vote separately on the amendment(s):	
"The number of vot	tes cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
11/1 Dated	13/2020	
Signature		<u></u>
	(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	Maria Rateliff	
	(Typed or printed name of person signing)	
	President	

(Title of person signing)