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

Office Use Only



100342404561

03/25/20--01001--004 *+52.50

AM 9: 10

2020 MAR 24 PH 3: 47 RECEIVED

MAR 2 7 2000

CORPORATE ACCESS, _

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

| | PIC | CK UP: | 03/24/2020 | _ | |
|------------------|-------------------------|----------|------------|---|-----------|
| ХХ | CERTIFIED COPY | | | | |
| | РНОТОСОРУ | | | | |
| xx | CUS | GS | | | |
| xx | FILING | AME | NDMENT | | |
| 1. | ADEP ASSOCIATES, I | NC | | | |
| _ | (CORPORATE NAME AND DOC | OMENT#) | | | |
| 2. | (CORPORATE NAME AND DOC | UMENT #) | | | |
| 3. | | | | | |
| | (CORPORATE NAME AND DOC | UMENT #) | | | |
| 4. | (CORPORATE NAME AND DOC | UMENT #) | | | |
| 5. | | | | | |
| | (CORPORATE NAME AND DOC | UMENT #) | | | |
| 6. | (CORPORATE NAME AND DOC | UMENT #) | | | |
| SPECIA INSTRI | AL UCTIONS: | | | | |
| | _ | | | | |
| | | | | | · <u></u> |

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: ADEP ASSOCIA | TES, INC | |
|-------------------------|--|--|---|
| | IBER: P18000005277 | | |
| | s of Amendment and fee are s | ubmitted for filing. | |
| Please return all corre | espondence concerning this m | atter to the following: | |
| | MICHAEL VARGAS | | |
| | | Name of Contact Pers | on |
| | ADEP ASSOCIATES, INC | | |
| | | Firm/ Company | |
| | 3561 SW 177TH AVE | | |
| | | Address | |
| | MIRAMAR, FL 33029 | | |
| | | City/ State and Zip Co | de |
| | MR.VARGAS515@GMAIL | СОМ | |
| | E-mail address: (to be u | sed for future annual repo | n notification) |
| | | | |
| For further information | n concerning this matter, plea | se call: | |
| MICHAEL VARGA | S | 305 | 790-1181 ode & Daytime Telephone Number |
| Name | of Contact Person | Area C | ode & Daytime Telephone Number |
| Enclosed is a check fo | or the following amount made | navable to the Florida Da | northwest of State. |
| | · mo tonowing amount image | payable to the Florida De | parunent of State: |
| S35 Filing Fee | □\$43.75 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) |
| <u>Mai</u> | ling Address | Street | Address |
| | endment Section | Amen | dment Section |
| | sion of Corporations Box 6327 | Divisi | on of Corporations |
| | thassee, FL 32314 | | Centre of Tallahassee |
| 7 4111 | | | N. Monroe Street, Suite 810 assee, FL 32303 |
| | | | |

Articles of Amendment to Articles of Incorporation

to

| | · · | /4 | | |
|--|---------------------------------|---|--|--------|
| ADEP ASSOCIATES, INC | | | | |
| (Name | of Corporation as curren | tly filed with the Florida Dept. of State) | | |
| P18000005277 | | | | |
| | (Document Number | of Corporation (if known) | _ | |
| Pursuant to the provisions of section 607 its Articles of Incorporation: | 7.1006, Florida Statutes, this | s Florida Profit Corporation adopts the follo | wing amendr | nent(s |
| A. If amending name, enter the new r | name of the corporation: | | | |
| N/A | | | 77 | |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "chartered," "professional association. | Corp." "Inc." or "Co". | "company," or "incorporated" or the abbreva A professional corporation name must con | The no lation "Corp ntain the wo | •• |
| B. Enter new principal office address | if annlicable: | 3561 SW 177TH AVE | | |
| (Principal office address MUST BE A STREET ADDRESS) | | MIRAMAR FL 33029 | | • |
| | | | | |
| C. Enter new mailing address, if app. (Mailing address MAY BE A POST | licable: <u>OFFICE BOX</u>) | 3561 SW 177TH AVE | | |
| | | MIRAMAR FL 33029 | | 202 |
| | | <u> </u> | > D > D | HA. |
| D. If amending the registered agent at new registered agent and/or the ne | nd/or registered office address | lress in Florida, enter the name of the | NATO ASSE | R 26 |
| Name of New Registered Agent | MICHAEL VARGAS | ** | | A |
| | 3561 SW 177TH AVE | | — [58] - [53] | بغ |
| | (Florida st | reet address) | <u> </u> | 0 |

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

(City)

Check if applicable

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)

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 Doe | | |
|-------------------------------|-----------|-------------------|------------------|----------------|
| \underline{X} Remove | <u>v</u> | Mike Jones | | 4 |
| X Add | <u>sv</u> | Sally Smith | | 31.EC |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s | AHAS |
| 1) Change | P | PHILLIP A WARNER | 14801 SW 18TH ST | Sirio |
| Add | | | MIRAMAR FL 33027 | 10800 10810 |
| X Remove | | | | <u> </u> |
| 2) Change | P | ALICIA J STRINGER | 14801 SW 18TH ST | |
| Add | | | MIRAMAR FL 33027 | |
| $\frac{X}{X}$ Remove Change | P | MICHAEL VARGAS | 14801 SW 18TH ST | |
| Add | | | MIRAMAR FL 33027 | |
| Remove | | | | |
| 1) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | | | |
| Add | | | | |
| Remove | | | | |
| í) Change | | | | |
| Add | | | | |
| Remove | | | | |

| The date of each amendment(s) addate this document was signed. | option: | if other than the |
|--|--|--------------------------------------|
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this blo document's effective date on the Dep | ock does not meet the applicable statutory filing requirements, this date artment of State's records. | will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were adoption was not required. | ted by the incorporators, or board of directors without shareholder action | and shareholder |
| The amendment(s) was/were adop by the shareholders was/were suff | ted by the shareholders. The number of votes east for the amendment(s) ficient for approval. | |
| ☐ The amendment(s) was/were appromist be separately provided for each | eved by the shareholders through voting groups. The following statement such voting group entitled to vote separately on the amendment(s): | |
| "The number of votes east fo | r the amendment(s) was/were sufficient for approval | 2020 HAR 26 SECRUTAR TALLAHASS |
| | (voting group) | R 26 |
| 03/25/2020 Dated | | |
| Signature | Plulm | 9: 10 |
| Selected, | ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary) | |
| P | HILLIP A WARNER | |
| _ | (Typed or printed name of person signing) | |
| PI | RESIDENT | |
| | (Title of person signing) | |