

P18000039876

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

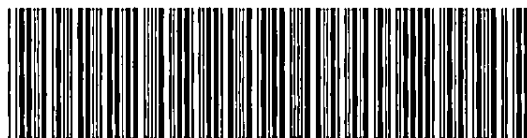
☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____



900321593619

FILED
2019 JAN 31 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FL

12/13/18--01008--003 **50.00

02/07/19--01013--004 **13.75

Special Instructions to Filing Officer:

Antwan
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3/5/19

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Amend.
2-1-19
DC



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 17, 2018

ANTOWAN J. CAIN
385 CHEROKEE COURT
ALTAMONTE SPRINGS, FL 32701

SUBJECT: FREEDOM SUPPLIES, INC.
Ref. Number: P18000039876

2019 JAN 23 AM 10:14
SECRETARY OF STATE
TALLAHASSEE, FL

RECEIVED

We have received your document for FREEDOM SUPPLIES, INC. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$13.75 is due.

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

The current name of the entity is as referenced above. Please correct your document accordingly.

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

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.

Darlene Connell
Regulatory Specialist II Supervisor

Letter Number: 318A00025838

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FREEDOM SUPPLIES INC.

DOCUMENT NUMBER: 918000039876

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANTOWAN JABBAR CAIN SR.
Name of Contact Person

FREEDOM SUPPLIES INC.
Firm/ Company

385 CHEROKEE COURT
Address

ALTAMONTE SPRINGS, FL. 32701
City/ State and Zip Code

ANTOWAN CAIN 32@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTOWAN CAIN at (407) 558.5906
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|--|--|--|--|

Mailing Address
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

Articles of Amendment
to
Articles of Incorporation
of

FREEDOM SUPPLIES, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

//

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

385 CHEROKEE COURT

ALTAMONTE SPRINGS, FL.

32701

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:

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

, Florida

(Zip Code)

2019 JAN 31 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

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.

Example:

X Change PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>X</u> Change ____ Add <u>X</u> Remove	<u>T.S.</u>	<u>JERMAINE FERGUSON</u>	<u>808 WALNUT PL.</u> <u>ALTAMONTE SPRINGS, FL. 32701</u>
2) ____ Change ____ Add <u>X</u> Remove	<u>D</u>	<u>JERMAINE FERGUSON</u>	<u>808 WALNUT PL.</u> <u>ALTAMONTE SPRINGS, FL. 32701</u>
3) <u>X</u> Change ____ Add ____ Remove	<u>T.S.</u>	<u>ANTOWAN J. CAIN SR.</u>	<u>385 CHEROKEE COURT</u> <u>ALTAMONTE SPRINGS, FL. 32701</u>
4) <u>X</u> Change ____ Add ____ Remove	<u>D</u>	<u>ANTOWAN J. CAIN SR.</u>	<u>385 CHEROKEE COURT</u> <u>ALTAMONTE SPRINGS, FL. 32701</u>
5) <u>X</u> Change ____ Add ____ Remove	<u>P.</u>	<u>ANTOWAN J. CAIN SR.</u>	<u>385</u> <u>CHEROKEE COURT</u> <u>ALTAMONTE SPRINGS, FL. 32701</u>
6) ____ Change ____ Add ____ Remove	_____	_____	_____

E. If amending or adding additional Articles, enter change(s) here:

(Attach *additional sheets, if necessary*). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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)

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 01.16.19

Signature Antwan J. Cain Sr.

(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)

ANTWAN J. CAIN SR.
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)