# P18 0000 73186

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I ALBRITTON

#### COVER LETTER

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION:	SCREWBIRDS, INC.	
DOCUMENT NUMBER:	P 18000073186	
The enclosed Articles of Amendme	ent and fee are submitted for filing.	
Please return all correspondence co	ncerning this matter to the following:	
	Name of Contact Person  SCREWBIRDS, INC.  Firm/ Company  257 AVE. S.,  Address  PETERSBURG, FL 3  City/ State and Zip Code  SCREWBIRDS. COM  address: (to be used for future annual report notification	3711
For further information concerning	this matter, please call;	
MELVIN WAIND Name of Contact Pe	WRIGHT at (727) 3	42 - 2122 time Telephone Number
Enclosed is a check for the following	ng amount made payable to the Florida Department of	State:
• • • • • • • • • • • • • • • • • • • •	Certified Copy Certi (Additional copy is Certi enclosed) (Add	itt Filing Fee ficaie of Status fied Copy Ittonal Copy closed)
Mailing Address Amendment Section of Corporation of Corporation (Corporation Corporation) P.O. Box 6327	ion Amendment Sec	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

#### Articles of Amendment to

### Articles of Incorporation

Ar	ticles of Amendment		8/1
Arti	to icles of Incorporation	10137	14.8%
SCREWBIRD	S / N/C.		25 Py
	as currently filed with the Flori	da Dept. of State)	<del>~~~ (5:0)</del>
P18000073180	/ ?		
······································	Number of Corporation (if know	n)	4,
rsuant to the provisions of section 607.1006. Florida Sta Articles of Incorporation:	ntutes, this <i>Florida Profit Corpo</i> i	ration adopts the following a	amendment(s) to
If amending name, enter the new name of the corpo	ration:		
			The new
ume must be distinguishable and contain the word " Corp.," "Inc.," or Co.," or the designation "Corp." " ord "chartered." "professional association." or the abb	'Inc," or "Co". A professional		
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADDRE</u>	<u></u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4816 0	25th AVE .	S.
		ERSBURG, I	
	7101	3371	
If amending the registered agent and/or registered		the name of the	
new registered agent and/or the new registered offli	<del></del>		
Name of New Registered Agent MELV/	N JAY WAINW	RIGHT, JR	
4816,2	5th AVE S.		
	granua sutre adares y		
New Registered Office Address: 57. PE	TERSBURG.	, Florida_ <u>337</u>	<u>/                                    </u>
	(City)	(Zip Cod	de)
'ew Registered Agent's Signature, if changing Registe	red Agent		
hereby accept the appointment as registered agent. Tar		ligations of the position.	
	/.		
(////////	// /		
Signagu	re of New Registered Agent, if ch	nging	

## 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:	a, and bun, com		
X Change	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>
1) Change	<u>C00</u>	TIMOTHY S. WAINWRIGHT	
Add			S. PASADENA, FL
Kemove			33707
2) X Change	CFO	Brody L. WAINWRISHT	4816 25th AVES.
Add			ST. PETERBURG, FL
Remove			33711
3) Change	<u>C00</u>	BAYOU J. WAINWRIGHT	
<u></u> ★ Add			ST. PETERSBURG, FL
Remove			33711
4) Change	CMO	LUKE T. WOODS	63879 TERRACE N. ST. PETERBURG, FL APT, 31
Add			ST PETERBURG, FL APT, 36
Remove			33702
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter changel (Attach additional sheets, if necessary). (Be specific)	<u>s) here</u> :	
NAME	TITLE	% of compan
MELVIN J. WAINWRIGHT, JR	PRESIDENT	75%
	CEO	10 %
BRODY L. WAINWRIGHT BAYOU J. WAINWRIGHT	COU	10%
LUKE T. Woods	(MO	5%
	<u> </u>	4
		<del></del>
F. If an amendment provides for an exchange, reclassificati	on, or cancellation of issued sha	res,
provisions for implementing the amendment if not conta (if not applicable, indicate N/A)	ained in the amendment itself:	

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 lit	e date)
Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for t by the shareholders was/were sufficient for approval.	he amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The homest be separately provided for each voting group entitled to vote separately on the ame	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
by	
☐ The amendment(s) was/were adopted by the board of directors withour shareholder action action was not required.  ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and	
action was not required.	
Dated $03/22/2019$	
Signature	<del> </del>
(By a director, pre <del>sident</del> or other officer – if directors or officers selected, by an incorporator – if in the hands of a receiver, truste	
appointed fiduciary by that fiduciary)	e, or other come
MELVIN JAY WAINWRIG (Typed or printed name of person signing)	HT, JR
/	•
OWNER/ FOUNDER (CO	0)
(Title of person signing)	