P18000083777

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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Bradford Bonovich, Inc P18000083777 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Kyle Kennelly, Esq. Name of Contact Person Thrive Law, P.A. Firm/ Company 2260 5th Avenue South, Suite 1 Address St. Petersburg, FL 33712 City/ State and Zip Code eservice@thrivelaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kyle Kennelly Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$43.75** Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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Bradford Bonovich, Inc.			
(Name	of Corporation as curren	tly filed with the Florida Dept. of State) Far C
18000083777			
-	(Document Number	of Corporation (if known)	
	·	,	0.7
	1.1006, Florida Statutes, this	s Florida Profit Corporation adopts the fi	ollowing amendin
s Articles of Incorporation:			
. If amending name, enter the new n	ame of the corporation:		
radford Bonavich, Inc.			Tr.
ime must be distinguishable and con	itain the word "corporati	on," "company," or "incurporated" or	The new
Corp.," "Inc.," or Co.," or the design	nation "Corp," "Inc," or	"Co". A professional corporation name	must contain the
ord "chartered," "professional associa	ation," or the abbreviation	"P.A."	
. Enter new principal office address,	if applicable:	N/A	
Principal office address <u>MUST BE A</u> S			·
1			
Enter new mailing address, if appl		N/A	
(Mailing address MAY BE A POST	<u>OFFICE BOX</u>)	-	
1			
		lress in Florida, enter the name of the	
new registered agent and/or the ne	w registered office addres	<u>s:</u>	
Name of New Registered Agent	N/A		
	/Elasida a	treet address)	
	•	reet adaress)	
New Registered Office Address:	N/A	, Florida_	
		(City)	(Zip Code)
1			
ew Registered Agent's Signature, if c		t: with and accept the obligations of the po	-141
servery accept the appointment as regist	iereu ugeni. 1 um jumiliar	with and accept the obligations of the po-	SuiOn.
1			

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)

f

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	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change		N/A	N/A
Add			
Remove			
2) Change			
Add			
Remove			
3) Change		-	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	(Be specific)
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If an amendment provides for an exch	nange, reclassification or cancellation of issued shares
If an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and the amendment itself:
(if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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(if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and and in the amendment itself:

	10/10/2018	
The date of each amendmen		, if other than the
date this document was signed		
Effective date if applicable:	10/10/2018	
Entervie date <u>ir appricable</u> .	(no more than 90 days after amendment file date)	_
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this date with Department of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
☐ The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
10/18 Dated	/2018	
SC	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court popointed fiduciary by that fiduciary)	
	Tonya Dannelle Floyd-Nye	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	