P18000092066

(Re	questor's Name)	
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(Cit	y/State/Zip/Phoni	e #)
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COVER LETTER

TO: Amendment Section

BIB NON 19 AH 11. 43 Division of Corporations NAME OF CORPORATION: PATROIT ADVISORS INC DOCUMENT NUMBER: P18000092066 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: BERNARD RIBORDY Name of Contact Person RIBORDY AND ASSOCIATES, IN Firm/ Company 8780 SEMINOLE BLVD Address SEMINOLE, FL 33772 City/ State and Zip Code BRIB165259@AOL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: BERNARD RIBORDY 7 397-9200 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: S35 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

Articles of Incorporation of
• • • • • • • • • • • • • • • • • • •
PATROIT ADVISORS INC
(Name of Corporation as currently filed with the Florida Dept, of State)
² 18000092066
(Document Number of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendics Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
PATRIOT ADVISORS INC
The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain two vord "chartered," "professional association," or the abbreviation "P.A."
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)
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: , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 Doc	
X Remove	<u>v</u>	Mike Jones	
_X Add		Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change			
Add			
Remove			
2) Change			_
Add			
Remove			
3) Change			-
Add			
Remove			·
4) Change		-	
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
CHANGE MISSPELLING OF NAME
-
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 NA)

	11/15/2018	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date w Department of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
,	(voting group)	
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
11/15/20 Dated	18	
Signature	Coh	
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	CHRISTOPHER BAERGA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	