1700000 7673

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
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R. WHITE

FEB 1 2 2019

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Collee Hills Inc		
DOCUMENT NUM	P19000007673		
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.	
Please return all corres	spondence concerning this mat	ter to the following:	
	Lori Moore		
		Name of Contact Person	
•	Cape Coral Accounting Servi	ce Inc	
		Firm/ Company	
	3501-212 Del Prado Blvd		
		Address	
	Cape Coral Fl 33904		
		City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·
lmoo	re@capecoralaccounting.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Lori Moore		at (239	542-2558
Name	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div	iling Address endment Section ision of Corporations . Box 6327	Āmend Divisio	Address ment Section n of Corporations Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

2019 FEB - 4 PM 3: 47

Collee Hills Inc	6 - 6 5 - 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(Name of Corporation as currently	filed with the Florida Dept. of State) IF Signal
P19000007673	INECHINACELITE
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
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: new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	ei address)
New Registered Office Address:	Florida
ſ	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	egistered 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 = ChiefExecutive 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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones.	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) X Change	P 	_ _	Geoffrey Weber	
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				<u> </u>
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

. If amending or adding additional (Attach additional sheets, if necessa	Articles, enter change(s) here: y). (Be specific)	
he name was mispelled as GEPGGRI		
		<u> </u>
<u> </u>		
		 -
		<u> </u>
		
. If an amendment provides for an	exchange, reclassification, or cancellation o	of issued shares,
provisions for implementing the (if not applicable, indicate N/.	amendment if not contained in the amendm	nent itself:
(y noi applicable, maicale is).	,	
		
		
		_

• •	01/31/19	if ashon then the
The date of each amendment(s) adoption date this document was signed.	:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Departmen	nes not meet the applicable statutory filing requirements, that of State's records.	is date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendator approval.	ient(s)
☐ The amendment(s) was/were approved be must be separately provided for each ye	by the shareholders through voting groups. The following stationary of the amendment (s):	ttement
	amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	the board of directors without shareholder action and share	holder
☐ The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and sharehold	er
01/31/19		
DatedSignature	one Moore	
selected, by an	president or other officer – if directors or officers have not be incorporator – if in the hands of a receiver, trustee, or other ciary by that fiduciary)	oeen · court
Lori M	loore Cape Coral Accounting Service Inc	
	(Typed or printed name of person signing)	
incorpo	orator	
	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·