## P1900012767

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: STRICKLAND'S S	SITE WORK, INC.	
DOCUMENT NUM	BER: P19000012767		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Patricia A. Sperry		
		Name of Contact Person	1
	Strickland's Site Work		
		Firm/ Company	
	247 Reserve Dr		
		Address	
	Tavares, Fl. 32778		
		City/ State and Zip Cod	e
	stricklandssitework@gmail.c	om	
		sed for future annual report	notification)
For further information	on concerning this matter, pleas		267-4362
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:
☐ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

STRICKLAND'S SITE WORK, INC.

(Name of Corporation		Glad with the	Clarida Dant	of State)		
P19000012767	n as currently	inea with the	riorius Depi	. or State)		
·	ent Number of (	Cornoration (if	known)	· · · · · ·	<del> </del>	
(Docume	ent ivalilities of v	Sorporation (ii	Known			
Pursuant to the provisions of section 607,1006, Floridats Articles of Incorporation:	Statutes, this F	o <mark>rida Profit C</mark> o	orporation ad	opts the fo	llowing ame	ndment(s)
A. If amending name, enter the new name of the cor	rporation:					
					The	
name must be distinguishable and contain the word "cor "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	or "Co". A					
B. Enter new principal office address, if applicable:				_		
Principal office address MUST BE A STREET ADD	RESS )				-	
		•	-1-1-2	<del></del> -		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u>X</u> )					
		,				
			<del></del> -	· · · ·	<u>-</u>	<del></del>
D. If amending the registered agent and/or registered		ss in Florida, e	enter the nan	ne of the		
new registered agent and/or the new registered o	office address:					,
Name of New Registered Agent						•
	(Florida stree	t address)				•
New Registered Office Address:				, Florida		
New Registered Office Mauress.	((	lity)	•		(Zip Code)	<del></del> -
New Registered Agent's Signature, if changing Regi				6.1	***	
hereby accept the appointment as registered agent. I	am jamiliar wi	іп апа ассері п	ne onugation.	s oj tne pos	шоп.	
Signat	ture of New Reg	istered Agent,	if changing		<del></del>	
Charlett Backle						
Check if applicable  The amendment(s) is/are being filed pursuant to s. 6	07.0120 (11) (e	). F.S.				

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.

X Change	PT	John Doc		
X Remove	$\underline{\mathbf{V}}$	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Nar</u>	<u>me</u>	<u>Addres</u> s
i) Change	0	Eln	ner D. Sperry III	319 W. Kentucky St.
X Add				Tavares, Fl. 32778
Remove				
Change		_		
Add				
Remove 3) Change		<del></del>		
Add				
Remove				
4) Change			J	
Add				. <u></u> .
Remove				
5) Change			·	
Add				
Remove				
6) Change			<u> </u>	
Add				
Remove				

The date of each amendment(s)	1/27/2024 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 document's effective date on the	block does not meet the applicable statutory filing requirements. Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amend sufficient for approval.	iment(s)
	pproved by the shareholders through voting groups. The following sor 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)	
selec	director, president or other officer – if directors or officers have not ted, by an incorporator – if in the hands of a receiver, trustee, or oth inted fiduciary by that fiduciary)	been er court
	Patricia A. Sperry	
	(Typed or printed name of person signing)	<del></del>
	Officer	\
	(Title of person signing)	1
		_

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
	<u> </u>
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	*1
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	٠,
All interest and all shares to be split between the 3 officers as follows:	1
Patricia A. Sperry - 45%	
Dean L. Strickland - 45%	•
Elmer D. Sperry III - 10%	- - -
	<del>.</del>

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