P190000 16047

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(
(Document Number)
Certified Copies Certificates of Status
······
Special Instructions to Filing Officer:
Office Use Only



05/02/19--01017--007 ++35.00

2019 HAY -2 PH 6: 05

COVER LETTER



The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:



Name of Contact Person at (941) 715-2828 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Street Address

Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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	Articles of Amendment	FILED
	to Articles of Incorporation	
	of 1	2019 HAY -2 PM 6:05
Executive 1	10023 of Florida -	
\bigcirc	f Corporation as currently filed with the Florida	Dept. of State)
51900016	047)	
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	1006, Florida Statutes, this <i>Florida Profit Corporatio</i>	on adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:	
		The new
name must be distinguishable and cont. "Corp.," "Inc.," or Co.," or the designe word "chartered." "professional associat	ain the word "corporation," "company," or "inc ation "Corp." "Inc" or "Co". A professional cor ion," or the abbreviation "P.A."	orporated" or the abbreviation poration name must contain the
B. Enter new principal office address, i	familicable: 2466 (Signaview Drive
(Principal office address <u>MUST BE A ST</u>		A FL 34288
C. Enter new mailing address, if applic		
(Mailing address <u>MAY BE A POST C</u>		rendview Drive
	North Bac	7-F1 34288
D. If amonding the resistant amont an		
new registered agent and/or the new	l/or registered office address in Florida, enter the registered office address:	name of the
Name of New Registered Agent	Darco R. Annunzia	270
		DSive
	(Florida street address)	
New Registered Office Address:	North Port	, Florida 34288
	(City)	(Zip Code)
New Registered Agent's Signature, if ch	anging Registered Agent:	
Thereby accept the appointment as registe	red agent. I am familiar with and accept the obliga	tions of the position.
J Xuly	Trusmen Innusiato	
	Sighature of New Registered Agent) if changi	ng
	~	
	Page 1 of 4	

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:

<u>X</u> Change	<u>PT</u>	<u>John E</u>	loe		
X Remove	$\underline{\mathbf{V}}$	<u>Mike J</u>	ones		
<u>X</u> Add	<u>sv</u>	<u>Sally S</u>	Smith		
<u>Type of Action</u> (Check One)	<u>Title</u>		Name		Address
1) Change	P	_	Paula	Annunciato	2308 Clovelon St.
Add					North Part, FL34291
X_Remove	~				
2) Change	<u>_</u>		micha	Annunzinti	0 2466 Gradien Drive
Add				NK I	North Port, FL 34288
Remove	VP		Darcy A	Relimen-	2466 Grandview Drive
Add	<u></u>	_	4 T	innunziato	North Pert FL
Remove					34288
4) Change		_			
Add					
Remove					
5) Change		_	<u></u>		
Add					
Remove					
6) Change		<u> </u>		· · · · · · · · · · · · · · · · · · ·	
Add					
Remove					
			Pa	e 2 of 4	

E. J	<u>If amending or adding</u>	additional Articles	, enter chang	(s) here:
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(Attach additional sheets, if necessary). (Be specific)	
$A \mid A$	
F. If an amendment provides for an exchange, reclassifica provisions for implementing the amendment if not con	ion, or cancellation of issued shares,
(if not applicable, indicate N/A)	anned in the amendment risen.
$A(\alpha)$	

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- <i>.</i>	The date of each amendment(s) adoption:	, if other than the
	date this document was signed.	
	Effective date if applicable:	n 90 days after amendment file date)
	{no more the	n 90 aays after amenament fre datef
	Note: If the date inserted in this block does not meet the ap document's effective date on the Department of State's record	plicable statutory filing requirements, this date will not be listed as the s.
	Adoption of Amendment(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted by the shareholders. by the shareholders was/were sufficient for approval.	The number of votes east for the amendment(s)
	□ The amendment(s) was/were approved by the shareholders must be separately provided for each voting group entitled	
	"The number of votes cast for the amendment(s) was	were sufficient for approval
	by	
	(voting group)	
	□ The amendment(s) was/were adopted by the board of direc action was not required.	ors without shareholder action and shareholder
	The amendment(s) was/were adopted by the incorporators action was not required. Dated Signature (By a director president or other selected, by an incorporator – if i appointed fiduciary by that fiduci	fficer - if directors or officers take not been the hands of a receiver, trustee, or other court
	Darcy Re.	Sngn-Annunzittio
	(Hyperat print	
		for person signing) ice Husicent
		Page 4 of 4

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