P190000 23306

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COVER LETTER

Division of Corporations
NAME OF CORPORATION: <u>Jacobsen Products</u> , Inc. DOCUMENT NUMBER: P 190000 23306
DOCUMENT NUMBER: P 190000 23306
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Joe Jacobsen Name of Contact Person
Name of Contact Person
Jacdosen Products Firm/Company
839 Carswell Ave
Additss 1
Holly Hill PC 32117 = 3
City/ State and Zip Code & C
Holly Hill PL 32117 City/ State and Zip Code Jacobsen Products @ gmail. com Email address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Soe Sacobsen at 386, 527-8587
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee

Mailing Address

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

Street Address

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

Articles of Amendment

to

Articles of Incorporation

of

Jacobsen Product	s, Inc.
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P1900002330	06
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the $\langle \cdot \cdot \rangle$
B. Enter new principal office address, if applicable:	·
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	E T
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	OR OR
	7:
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre	dress in Florida, enter the name of the
Name of New Registered Agent	
(Florida	street address)
	[2]; I
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age Thereby accept the appointment as registered agent. I am familia	nt: or with and accept the obligations of the position.
Energy decept the approximation are registered agents a total failure	
Signature of New	c 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, 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 = C Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each of 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. Ther 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 Chan Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe		
X Remove	$\underline{\mathbf{V}}$	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address
1) _X_ Change	<u>P</u>	Joseph	Jacobsen	There was a typo so his was spelled wrom This is, the correct
Add		•	-	typo so his u
Remove				was spelled wrom
2) Change				This is the correct
Add			-	
Remove			-	22. 23. 27.
3) Change		<u> </u>		A TO
Add			-	
Remove				
4) Change				T. O.a
Add			-	
Remove				
5) Change		<u></u>		
Add			-	
Remove				
6) Change				
Add				
Damasa				

Attach additional sheets, if necessary). (Be specific)		
 - - -		
	-	
		- -
	2619 TALL	
		e47
f an amendment provides for an exchange, reclassification, or cancellation of issued share	<u>略</u>	
provisions for implementing the amendment if not contained in the amendment itself:	vi i	[
(if not applicable, indicate N/A)	L3 ~	Ţ
	<u></u> . T	Ţ
	0 ± ±0	-
	_ .	

The date of each amendment(s) a date this document was signed.	loption:	- -	, it other than
Effective date if applicable:	(no more than 90 J.m.	s after amendment jile date)	
	ono more man vo any.	s tijter timentime ti jne titier	
Note: If the date inserted in this bedocument's effective date on the De	plock does not meet the applicable appartment of State's records.	statutory filing requirements, t	his date will not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were ado by the shareholders was/were st	opted by the shareholders. The number of the first for approval.	ber of votes east for the amend	ment(s)
☐ The amendment(s) was/were apmust be separately provided for	proved by the shareholders through verticed to vote s	voting groups. The following separately on the amendment(s	latement):
"The number of votes cast	for the amendment(s) was/were suff	ficient for approval	
by			
	(voting group)		
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors with	out shareholder action and shar	eholder
The amendment(s) was/were ad action was not required.	opted by the incorporators without sl	harcholder action and sharehol	
Dated		_	APA -U F
Signature			
selecte	lirector, president or other officer – ind. by an incorporator – if in the hand ted fiduciary by that fiduciary)		
	(Typed or printed name	of person signing)	
	(Title of per	rson signing)	

as