P19 000063154

(Re	equestor's Name)				
(Ad	ldress)				
(Ad	ldress)				
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Nar	ne)			
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					





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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: Beigh Inc.	<u></u> .				
DOCUMENT NUM	P19000063154					
The enclosed Articles	s of Amendment and fee are sul	bmitted for filing.				
Please return all corre	espondence concerning this mat	tter to the following:				
	Penny Beigh					
		Name of Contact Persor	l			
	Rick's Family Electric Inc.					
		Firm/ Company				
15821 Jade Ct. N.						
	Address					
North Fort Myers, Fl. 33917						
City/ State and Zip Code						
na	nolong7660@gameset not					
<u>pe</u>	nelope7660@comeast.net	to be used for future annua	Leanart notification)			
	E-man address. (to be used for future aimua	report notification)			
For further informati	on concerning this matter, pleas	se call:				
Penny Beigh		at (<u>239</u>	980-0517			
Namo	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check t	for the following amount made	payable to the Florida Dep	artment of State:			
■ \$35 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)			
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327		Divisio	Iment Section on of Corporations entre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



20217-1-2:15

FLORIDA DEPARTMENT OF STATE Division of Corporations

January 9, 2021

PENNY BEIGH 15821 JADE CT N NORTH FORT MYERS, FL 33917

SUBJECT: BEIGH, INC.

Ref. Number: P19000063154

We have received your document for BEIGH, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 521A00000472

Irene Albritton Regulatory Specialist II

www.sunbiz.org

www.sumbtz.org



565, M. . . .

FLORIDA DEPARTMENT OF STATE **Division of Corporations**

January 9, 2021

PENNY BEIGH 15821 JADE CT N NORTH FORT MYERS, FL 33917

SUBJECT: BEIGH, INC. Ref. Number: P19000063154

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Irene Albritton Regulatory Specialist II

Letter Number: 521A00000472

Articles of Amendment

to

Articles of incorporatio	Articles of I	ncorporation
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of

Beigh Inc.	
(Name of Corporation as currently	filed with the Florida Dept. of State)
~ 1900001315	4
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Clorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	Ct6'C Inc. The new
"Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	1.
	.0,
C. Fatar and mailing address if applicables	
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	et address)
New Registered Office Address:	, Florida
	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	gistered Agent, if changing
Check if applicable	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

ttach additional sheets, if necessary).	(ne specyte)				
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	**				
an amendment provides for an excha	inge, reclassifi	ication, or can	cellation of iss	ued shares,	
provisions for implementing the amen	dment if not o	contained in th	<u>ie amendment</u>	itself:	
(if not applicable, indicate N/A)					
			· · ·		
		- 			
				· · · · · · · · · · · · · · · · · · ·	
				••	

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	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jos	nes	
X Add	<u>SV</u>	<u>Şally Sn</u>	nith	
Type of Action (Check One)	Title		Name	Address
1) Change				
Add				
Remove				
2) Change				
Add				
Remove 3) Change		···		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

`he date of each amendment(s) adoption: _	11/20/20	, if other than the
ate this document was signed.	11/10/10	
Effective date if applicable:	(no more than 90 days after amenda	nent file date)
Note: If the date inserted in this block does locument's effective date on the Department		g requirements, this date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by the action was not required.	he incorporators, or board of directors w	ithout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		ast for the amendment(s)
☐ The amendment(s) was/were approved by must be separately provided for each votil	the shareholders through voting groups. ing group entitled to vote separately on t	The following statement he amendment(s):
"The number of votes cast for the an	mendment(s) was/were sufficient for app	roval
by		"
DatedSignature(By a director, preselected, by an ir	resident or other officer – if directors or one incorporator – if in the hands of a received incorporator of the hands of a received incorporator of the hands of a received incorporator of person sign of the hands of the hands of person sign of the hands of person sign of the hands of the ha	r, trustee, or other court
V;C	(Title of person signing)	