

10/1/2019

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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## To:

Division of Corporations  
Fax Number : (850)617-6380

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Account Number : I20150000090  
Phone : (904)567-5311  
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**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
CEDAR STREET, INC**

Certificate of Status	0
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R. W. HART  
OCT 01 2019

2019 OCT -3 AM 5:28

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10/2/2019 10:18:06 AM PAGE

1/001

Fax Server



October 2, 2019

FLORIDA DEPARTMENT OF STATE  
Division of CorporationsCEDAR STREET, INC  
702 1ST  
NEPTUNE BEACH, FL 32266SUBJECT: CEDAR STREET, INC  
REF: P19000071174

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

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

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R. McNair  
Regulatory Specialist IIFAX Aud. #: H19000292191  
Letter Number: 319A00020254

2019 OCT -3 PM 1:15

P.O BOX 6327 - Tallahassee, Florida 32314

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Cedar Street, Inc.

**DOCUMENT NUMBER:** P19000071174

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

Please return all correspondence concerning this matter to the following:

Lauren Weisman

Name of Contact Person

ADVOS Legal pllc

Firm/ Company

5000 Sawgrass Village Drive Suite 7

Address

Ponte Vedra Beach, Florida 32082

City/ State and Zip Code

support@advoslegal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lauren Weisman

Name of Contact Person

at ( 904 )

5675311

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

☐ \$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  
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

2019 OCT -3 AM 5:28

Cedar Street, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P19000071174

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

Cedar Street, Inc.

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**(Principal office address **MUST BE A STREET ADDRESS**)**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 in Florida, enter the name of the new registered agent and/or the new registered office address:**Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

, Florida

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New 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 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 ~ Executive Officer; CFO ~ Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each 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. If 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:

☒ Change                      PT      John Doe  
  
☐ Remove                      V      Mike Jones  
  
☒ Add                      SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	PST	Jeff Tyrrell	702 1st Street
<input type="checkbox"/> Add			Neptune Beach, FL 32266
<input type="checkbox"/> Remove			
2) <input checked="" type="checkbox"/> Change	VP	Holly Tyrrell	702 1st Street
<input type="checkbox"/> Add			Neptune Beach, FL 32266
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

[illegible][illegible]

September 27, 2019

The date of each amendment(s) adoption: \_\_\_\_\_, if other 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 block does not meet the applicable statutory filing requirements, this date will not be its document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*
- "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 directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 10-03-2019

Signature Jeffrey E. Tyrrell

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Jeffrey E. Tyrrell

(Typed or printed name of person signing)

President

(Title of person signing)