## P19000071835

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORP	ORATION: GREAT NORTH	WEST DEVELOPERS, INC	<u>.                                    </u>		
DOCUMENT NU	MBER: P19000071835				
	es of Amendment and fee are su	bmitted for filing.			
Please return all cor	respondence concerning this ma	itter to the following:			
	LINJE RIVERS				
	Name of Contact Person				
		Firm/ Company			
	3065 HIGHLAND OAKS TERRACE				
	Address TALLAHASSEE, FL 32301				
		City/ State and Zip Code	e		
	LRIVERS@KRLAWPA.CO	)M			
	E-mail address: (to be u	sed for future annual report	notification)		
For further informa	tion concerning this matter, plea		1		
Name of Contact Person		Area Co	) de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:		
S35 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment

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Articles of Incorporation of 9

2021 MAR 11 AM 11: 11

GREAT NORTHWEST DEVELOPERS, INC.

GREAT NORTHWEST DEVELOPERS,					
P19000071835					
	(Document Number	of Corporation (if known)			
ursuant to the provisions of section 607.1 s Articles of Incorporation:	006. Florida Statutes, this	s Florida Profit Corporation adopts the following amendmen			
. If amending name, enter the new na	me of the corporation:				
		The new			
ame must he distinguishable and contain Inc.," or Co.," or the designation "Co chartered," "professional association,"	orp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word "			
B. Enter new principal office address, if applicable:		3065 HIGHLAND OAKS TERRACE			
Principal office address <u>MUST BE A ST</u>	<u>(REET ADDRESS</u> )	TALLAHASSEE, FL 32301			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		3065 HIGHLAND OAKS TERRACE			
· · · · · · · · · · · · · · · · · · ·	,	TALLAHASSEE, FL 32301			
. If amending the registered agent and	d/or registered office add	dress in Florida, enter the name of the			
new registered agent and/or the new	registered office addres	<u>ss:</u>			
Name of New Registered Agent					
-	(Florida s	treet address)			
New Registered Office Address:	3065 HIGHLAND OAKS TERRACE, TALLAHASSEE Slorida 32301				
<u> </u>		(City) (Lip Code)			
ew Registered Agent's Signature, if ch hereby accept the appointment as registe		it: with and accept the obligations of the position.			
		D			
	Signature of New .	Registered Agent, if changing			
Theck if applicable					

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (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)

Example:

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 Doe X Remove $\underline{V}$ Mike Jones <u>X</u> Add <u>SV</u> Sally Smith Type of Action Title Name Address (Check One) CLAYTON KNOWLES 3065 HIGHLAND OAKS TERRAC 1) \_\_\_\_ Change TALLAHASSEE, FL 32301 \_\_\_\_ Add Remove LARRY RIVERS 3065 HIGHLAND OAKS TERRAC Change TALLAHASSEE, FL 32301 Add Remove COO HAROLD KNOWLES 3065 HIGHLAND OAKS TERRAC 3) \_\_\_\_ Change TALLAHASSEE, FL 32301 $_{\perp}$ Add Remove LINJE RIVERS 3065 HIGHLAND OAKS TERRAC **CFO** 4) Change TALLAHASSEE, FL 32301 Add Remove 5) \_\_\_\_ Change Add Remove 6) \_\_\_\_ Change \_\_\_ Add Remove

Attach <i>add</i>	g or adding additional Articles, enter change(s) here: tional sheets, if necessary). (Be specific)	
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		<u> </u>
f an amen	dment provides for an exchange, reclassification, or cancellation of issue for implementing the amendment if not contained in the amendment	ued shares,
<u>provision:</u> (if not	applicable, indicate N/A)	nsen:
,,,	,	
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	1/12/2021	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	12/2021	
Effective date <u>if applicable</u> :		<u> </u>
	(no more than 90 days after ame	ndment file date)
Note: If the date inserted in this document's effective date on the		ling requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of director	s without shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of vote sufficient for approval.	s cast for the amendment(s)
	pproved by the shareholders through voting grou or each voting group entitled to vote separately o	
"The number of votes ca	st for the amendment(s) was/were sufficient for a	approval
by		
	(voting group)	
selec	director president or other officer – if directors ted, by an incorporator – if in the hands of a recented fiduciary by that fiduciary)  LINJE RIVERS	
	(Typed or printed name of person s	signing)
	CFO	
	(Title of person signing)	