## P19000073089

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SECRETARY OF STATE
TALLAHASSEE FLORIO?

APR 30 2020

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

2520 15" - 5 F" 12: 10

NAME OF CORPO	RATION: SOVEREIGN CO	NSULT, INC	
	BER: P19000073089		
The enclosed <i>Article</i> :	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	FERNANDA QUITERIO		
	-	Name of Contact Person	1
SOVEREIGN CONSULT, I		NC.	
		Firm/ Company	
	10075 0 4 1/4 101 4 11 11 11 11 11 11 11 11 11 11 11 11		
	10975 SAVANNAH WOOD		·
		Address	
	ORLANDO, FLORIDA 3283	32	
	<u> </u>	City/ State and Zip Cod	e
	fernanda.quiterio@sconsult.u	18	
	• -	sed for future annual report	notification)
For further information	on concerning this matter, pleas		353-9353
Name	of Contact Person	ar ( Area Co	_) 353-9353 de & Daytime Telephone Number
	or the following amount made		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status
An Div	niling Address mendment Section rision of Corporations	Street Address Amendment Section Division of Corporations	
P.O. Box 6327			entre of Tallahassee N. Monroe Street, Suite 810
Tallahassee, FL 32314		Tallahascoo, FL 32303	

## Articles of Amendment to Articles of Incorporation of

SOVEREIGN CONSUL	Ι.	LNU
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(Name of Corporation as curren	ntly filed with the Flo	rida Dept. of State)	
P19000073089			
(Document Number	of Corporation (if kn	own)	
Pursuant to the provisions of section 607,1006, Florida Statutes, thints Articles of Incorporation:	is Florida Profit Corp	oration adopts the following	g amendment(s) t
A. If amending name, enter the new name of the corporation:			
SOVEREIGN ENGINEERS, INC -			The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A	A professional corp		и "Corp.,"
B. Enter new principal office address, if applicable:	N/A	<del></del>	
(Principal office address MUST BE A STREET ADDRESS)			220
	-	> ić	<b>₽</b>
		AS A	<b>₽</b>
	<del></del>		<del>- 5</del>
C. Enter new mailing address, if applicable:	N/A	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>	
·		<u>교</u> 조	9
	-		<del></del>
D. If amending the registered agent and/or registered office ad		er the name of the	
new registered agent and/or the new registered office addre	<u> 2881</u>		
Name of New Registered Agent N/A			
N/A			
(Florida :	street address)		
New Registered Office Address:		. Florida	
Sew Registered Office Address.	(City)	T torteta(Zip C	ode)
	•	•	
Name Danieranad Vannt's Cianatura of abandon Danierand Vas			
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent.—I am familia		oblivations of the position	
тегелу имеері іне арранішені из гедізістей адені. Тат јатако	a wan dan de equine .	raigunam ty tak pamilam.	
<del></del>	75		
Signature of New	Registered Agent, if c	nanging	

Check if applicable

 $\blacksquare$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c). 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)

•;

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: X Change <u>PT</u> <u>John Doe</u> X Remove  $\underline{\mathbf{V}}$ Mike Jones  $\underline{X}$  Add  $\underline{SV}$ Sally Smith Address Type of Action Title <u>Name</u> (Check One) N/A 1) \_\_\_\_ Change \_\_ Add \_ Remove N/A 2) \_\_\_\_ Change \_\_ Add \_ Remove N/A \_\_ Change \_\_ Add \_\_ Remove N/A4) Change \_\_\_ Add \_\_ Remove N/A 5) \_\_\_\_ Change \_\_\_\_ Add Remove N/A 6) \_\_\_\_ Change \_\_ Add Remove

Attach additional sheets, if necessary). (Be specific)	
1	
	<u></u>
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	<del></del>
	21
If an amendment provides for an exchange, reclassification, or cancellation of issued share	2020 APP
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable indicate MA)	7.29 7.27 7.37
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A) A	
(if not applicable, indicate N/A)	. 10 프
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	``'
(if not applicable, indicate N/A)	

	04/01/2020	
The date of each amendment date this document was signed.		, if other than the
Effective date if applicable:	04/06/2020	
	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without shareholder action and sh	archolder
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes east for the amendment(s) are sufficient for approval.	_
"The number of votes by	(voting group)	***: *** * * **
se		
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	