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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Amlee Holdings, I	nc.		
DOCUMENT NUM	BER: P19000073216			
	of Amendment and fee are su	ibmitted for filing.		
Please return all corre	spondence concerning this ma	atter to the following:		
	Lee P Esbin			
		Name of Contact Perso	n	
	Amlee Holdings, Inc.			
		Firm/ Company		
	457 Jupiter Lakes Blvd., #11	9		
		Address		
	Jupiter, FL 33458			
		City/ State and Zip Cod	e	
Amle	ceHoldingsInc@Gmail.com			
	E-mail address: (to be u	sed for future annual report	notification)	
For further information	on concerning this matter, plea	se call:		
Lee P Esbin		at (864-1724	
Name of Contact Person Area Code & Daytime T			de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
S35 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		Street Address		
	endment Section ision of Corporations	Amendment Section Division of Corporations		
	Box 6327	Clifton Building		
	lahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed P19000073216 (Document Number of Corp Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florid</i> its Articles of Incorporation:	oration (if known)	. of State)		
(Document Number of Corp Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florid</i>	,			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florid</i>	,			
	I D C.C.			
·	a Profit Corporation ad	lopts the following	g amendment(s)	
A. If amending name, enter the new name of the corporation:				
			The new	
name must be distinguishable and contain the word "corporation," " "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", word "chartered," "professional association," or the abbreviation "P.A.'				
3. Enter new principal office address, if applicable:	7 Jupiter Lakes Blvd.			
(Principal office address MUST BE A STREET ADDRESS) #1	19			
Ju	oiter, FL 33458		· 	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 45	7 Jupiter Lakes Blvd.			
#1	19		- · 	
Juj	oiter, FL 33458		<u>~</u> 0 .20	
D. If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:	Florida, enter the nam	ne of the		
Name of New Registered Agent				
457 Jupiter Lakes Blvd. #119				
(Florida street add	(Florida street address)			
New Registered Office Address: Jupiter		. Florida		
(City)		(Zip C	'ode)	

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>	John Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jo	<u>nes</u>		
_X Add	<u>SV</u>	Sally Sn	nith		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Ĺ	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					

						
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				·		
<u>at provides for ac</u>	<u>i exchange, rec</u>	lassification,	or cancellation	of issued share	<u>es.</u>	
			d in the amend	<u>lment itself:</u>		
icame, maicule iv.	(21)					
				- ··		
						
				 		
	implementing the	implementing the amendment if	ent provides for an exchange, reclassification, of implementing the amendment if not contained flicable, indicate N/A)	implementing the amendment if not contained in the amend	implementing the amendment if not contained in the amendment itself:	

	October 21, 2019	, if other than the
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 document's effective date on the I	block does not meet the applicable statutory filing requirements, this da Department of State's records.	te will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(sufficient for approval.	i)
	pproved by the shareholders through voting groups. The following statemed or each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	·	
•	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholde	r
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
	La Par -	
Signature(By a	director, president or other officer – if directors or officers have not been	
` -	ted, by an incorporator – if in the hands of a receiver, trustee, or other cour	1
арро	nted fiduciary by that fiduciary)	
	Lee P. Esbin	
	(Typed or printed name of person signing)	
	Secretary/Treasurer	
	(Title of person signing)	