## P19000091682

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

Hutchison Law, P.A NAME OF CORPORATION: 19000091682 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: northey D. Hutchison, ESS Name of Contact Person 1 futchison Law, P.A. 400 5-40 Ave. S. Suite 200 Naples, Fl 34102
City/State and Zip Code Chutch @gohutch law. com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Hutchison, Esq. at (239) 330 - 1904 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 & ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Mailing Address **Street Address** Amendment Section Amendment Section Division of Corporations **Division of Corporations** The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

. 1 . 1	
Hulchison Law, P.	A: 2020 DEC 21 PM 2: 25
(Name of Corporation as currentl	ly filed with the Florida Dept. of State)
P19000091682	SECRETARY OF STATE
(Document Number of	f Corporation (if known)
rsuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following amendmen
If amending name, enter the new name of the corporation:	
	The new
me must be distinguishable and contain the word "corporation," "conc.," or Co.," or the designation "Corp," "Inc," or "Co". A hartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
Enter new principal office address, if applicable:	400 5th Awe. S.
rincipal office address <u>MUST BE A STREET ADDRESS</u> )	400 5th Ave. S. Suite 200
	Naples, FL 34102
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office address	
Name of New Registered Agent	
Name of New Registered Agent	
	o S. Sill te 200 reet address)
Name of New Registered Agent	

Check if applicable

. . . . . . . . . . .

<sup>☐</sup> 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)

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	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)	
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<del></del>		
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f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:	
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:	
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and amendment itself:	
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and if not contained in the amendment itself:	
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:	

. . .

The date of each amendment(s) adoption:
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 listed as the 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 incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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
bv"
(voting group)
Dated 12/18/2020 Signature 12/18/2020
(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)
Courtney D. Hutchison, Esop (Typed or printed name of person signing)
Presiden 4 / Owner  (Title of person signing)