## P20 000000-441

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Mend

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: SEMINOLE WIN	D RANCH INC.	
DOCUMENT NUM	BER: P20000004641		
	s of Amendment and fee are su	bmitted for tiling.	
Please return all corre	espondence concerning this ma	tter to the following:	
	RYAN OLIVER		
		Name of Contact Persor	)
	SEMINOLE WIND RANCH	HNC	
		Firm/ Company	
	29248 STATE ROAD 44		
	**	Address	
	EUSTIS, FL 32736		
		City/ State and Zip Code	2
		,	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
RYAN OLIVER			
Name	of Contact Person	at ( Area Cod	) de & Daytime Telephone Number
waine of Contact Person			
Enclosed is a check f	or the following amount made	payable to the Florida Depa	urtment of State:
■ \$35 Filing Fee	S43.75 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		Amend Divisio	Address ment Section n of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

SEMINOLE WIND KANCH INC		
(Name of Corporation	n as currently filed with the Florida L	Dept. of State)
P20000004641		
(Docume	ent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporatio	n adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	rporation:	
		***
name must be distinguishable and contain the word "cor "Inc.," or Co.," or the designation "Corp." "Inc.," "chartered," "professional association," or the abbrev	or "Co". A professional corporatio	
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADD)	<u>RESS</u> )	202
		1 3 0 7 3
		1 22
C. Enter new mailing address, if applicable:	.71	. 20
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	<u> </u>	
		<u> </u>
D. If amending the registered agent and/or registere	ed office address in Florida, enter the	name of the
new registered agent and/or the new registered o		
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
		•
New Registered Agent's Signature, if changing Regis	ntamad Amant.	
I hereby accept the appointment as registered agent. 1	am familiar with and accept the obligat	tions of the position.
Signat	ture of New Registered Agent, if changing	10
orgina.	,	'n

Check 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)

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 Doe	
X Remove	<u>v</u>	Mike Jones	
	_ <u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	VINCENT OLIVER	29248 STATE ROAD 44
Add			EUSTIS, FL 32736
X Remove			
2) Change	VP	RYAN OLIVER	29248 STATE ROAD 44
Add			EUSTIS. FL 32736
X Remove 3) Change	<u> </u>	RYAN OLIVER	29248 STATE ROAD 44
X Add			EUSTIS, FL 32736
Remove			
4) Change	VP	VINCENT OLIVER	29248 STATE ROAD 44
x Add			EUSTIS, FL 32736
Remove			
5) Change		_	
Add			
Remove			
6) Change		_	
Add			<del></del>
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
- <del> </del>	
<u> </u>	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nament it not contained in the amendment usen;
<del></del>	

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no mo	re than 90 days after amendment file date)
Note: If the date inserted in this block does not meet to document's effective date on the Department of State's r	he applicable statutory filing requirements, this date will not be listed as the ecords.
Adoption of Amendment(s) (CHECK O	<u>NE</u> )
The amendment(s) was/were adopted by the incorpor action was not required.	ators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the sharehol by the shareholders was/were sufficient for approval	
☐ The amendment(s) was/were approved by the sharehor must be separately provided for each voting group en	
"The number of votes east for the amendment(s	) was/were sufficient for approval
by	<del></del>
(voting group	p)
Dated 02 10 20	
Signature Company	La company of the com
(By a director, president or o	other officer – if directors or officers have not been – if in the hands of a receiver, trustee, or other court iduciary)
12 yan	printed name of person signing)
Preside	nt
(Title of )	person signing)