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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations NAME OF CORPORATION: The Incredible Giants Moving Company DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jason Gray Name of Contact Person The Incredible Giants Moving Company Firm/ Company 128 W. America Street, Suite 23 Address Orlando, FL 32801 City/ State and Zip Code grizzygiant@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (727) 776-7374

Area Code & Daytime Telephone Number Jason Gray Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐\$52.50 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & S35 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

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The Incredible Giants Moving Company						
(Name o	f Corporation as curren	tly filed with the Florida Dep	t. of State)			
P20000006152			<u> </u>			
	(Document Number	of Corporation (if known)				
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation a	dopts the following amendment	t(s) to		
A. If amending name, enter the new na	ime of the corporation:					
			The new			
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered." "professional association."	"orp," "Inc," or "Co".	A professional corporation i	or the abbreviation "Corp.," name must contain the word			
B. Enter new principal office address,		128 W. America Street				
(Principal office address MUST BE A S		Suite 23				
		Orlando, FL 32801	ا ب <u>ا جا</u>			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		128 W. America Street	<u> </u>	: :		
		Suite 23	= = = = = = = = = = = = = = = = = = = =	³		
		Orlando, FL 32801				
D. If amending the registered agent an new registered agent and/or the new	nd/or registered office ad y registered office addre	dress in Florida, enter the na	me of the			
Name of New Registered Agent	Jason Gray					
	128 W. America Street,	Suite 23				
	(Florida :	street address)				
New Registered Office Address:	Orlando, FL		, Florida			
res registered system con-		(City)	(Zip Code)			
New Registered Agent's Signature, if c	hanging Registered Age	nt:				
I hereby accept the appointment as regist	tered agent. I am familia	r with and accept the obligatio	ns of the position.			
	Signature of New	Registered Agent, if changing				
Check if applicable The amendment(s) is/are being filed p	oursuant to s. 607.0120 (1	1) (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>X</u> Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address			
1) Change	VP	Meghan Shea	147 Lago Vista Blvd			
Add			Casselberry, FL 32707			
X Remove						
2) Change						
Add						
Remove 3) Change						
Add						
Remove						
4) Change	_					
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

And this is it wis Prime Distriction	t longer acting as si	uch.			
ease change address 147 Lago Vis	ta Blvd to address	128 W. America	Street for any fiel	lds for this busines	is.
17 Lago Vista Blvd is no longer a v	valid address in any	capacity for this	business.		
					
<u> </u>				-	
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			· <u> </u>		<u> </u>
				and charge	
If an amendment provides for provisions for implementing t	the amendment if	not contained in	the amendment	itself:	
(if not applicable, indicate	N/A)				
	····	<u></u>			
<u> </u>					-
<u></u>					
				-	

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	ent(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	'ement
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
05/30/2 Dated	020	
Signature	a director, president or other officer – if directors or officers have not be	
sele	eted, by an incorporator – if in the hands of a receiver, trustee, or other opinted fiduciary by that fiduciary)	
	Meghan Shea	
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	