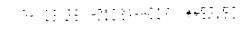
P200000 17434

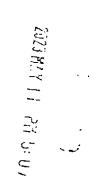
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Office Use Only



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11223

COVER LETTER

· TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: AR Patton Associa	ites, Inc.		
	BER:			
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.		
Picase return all corr	espondence concerning this ma	ner to the following:		
	Anthony Patton			
	- -	Name of Contact Person	<u>. </u>	
	AR Patton Associates, Inc.			
		Firm/ Company		
	105 Nina Ct			
		Address		
Ponte Vedra Beach, FL 32082				
	-	City/ State and Zip Code	;	
	apatton@rmepowertech.com			
		sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
Anthony (Andy) Pat	ton	904 at (759-4838 de & Daytime Telephone Number	
Name	of Contact Person	Area Coc	le & Daytime Telephone Number	
Enclosed is a check t	or the following amount made	payable to the Florida Depa	rtment of State:	
☐ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
An	ailing Address nendment Section vision of Corporations	Amend	Address ment Section n of Corporations	

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to : Articles of Incorporation of

AR Patton Associates, Inc.	
(Name of Corporation as	s currently filed with the Florida Dept. of State) 1 Ph 5: U,
P20000017634	
	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statuts Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corpor	ration:
	The - new
name must be distinguishable and contain the word "corpore" "Inc.," or Co.," or the designation "Corp," "Inc." or "chartered," "professional association," or the abbreviation	ration," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word ion "P.A."
	N/A
B. <u>Enter new principal office address, if applicable:</u> (<i>Principal office address <u>MUST BE A STREET ADDRES</u></i>	<u>(355</u>) N/A
	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
(Mailing address SIAT BL A LOST OF LEE	N/A
	N/A
D. If amending the registered agent and/or registered office	office address in Florida, enter the name of the
D. If amending the registered agent and/or registered agent and/or the new registered office new registered office.	ice address:
N/A	
Name of New Registered Agent N/A	
	(Florida street address)
• · · · · · · · · · · · · · · · · · · ·	
N/A	Florida N/A

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

٠, 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 = ChiefExecutive Officer: CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held.

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, d Sally Smith SV as an Add

Mike Jones, V as Remove	, and Sal	ly Smith, SV as an Add.	
Example: <u>X</u> 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)	Title	<u>Name</u>	<u>Addres</u> s
1) N/A Change		N/A	
Add			
Remove		N1/ 1	
2) N/A Change		N/A	
Add			
Remove 3) <u>N/A</u> Change	·	N/A	
Add			
Remove			
4) N/A Change		N/A 	
Add			
Remove			
5) N/A Change		N/A	
Add			
Remove		N/A	
6) N/A Change		(20A)	
Add			
Remove			

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	cles, enter change(s) (Be specific)	here:			
N/A					
N/A					
N/A					
19					<u></u>
					
					
					<u></u>
					
	<u>_</u>				
					. <u> </u>
F. If an amendment provides for an exc	hange reclassificati	on, or cancell <u>a</u>	tion of issued sh	ares,	
provisions for implementing the ame	endment if not cont	ained in the am	iendment itself:		
(if not applicable, indicate N/A) N/A					
N/A					
			<u> </u>		
N/A					
				<u></u>	

	Date Signed	, if other than th
The date of each amendment(s) ado late this document was signed.		. It office that the
Date S Effective date <u>if applicable</u> :	-	
The control of the co	(no more than 90) days after amendmer	n file date)
Note: If the date inserted in this blo locument's effective date on the Dep	ck does not meet the applicable statutory filing rement of State's records.	equirements, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adoptaction was not required.	ed by the incorporators, or board of directors with	iout shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ed by the shareholders. The number of votes east icient for approval.	for the amendment(s)
must be separately provided for e	oved by the shareholders through voting groups. To ach voting group entitled to vote separately on the	amenanem;s/.
	r the amendment(s) was/were sufficient for appro	
by N/A	(voting group)	·"
	(voting group)	
selected	ector, president or other officer - if directors or of by an incorporator - if in the hands of a receiver, d fiduciary by that fiduciary)	Ticers have not been trustee, or other court
• •		
	Anthony R Patton	
•	(Typed or printed name of person sigm	ng)
	President	
-	(Title of person signing)	



May 1, 2023

ANTHONY PATTON 105 NINA CT PONTE VEDRA BEACH, FL 32082

SUBJECT: AR PATTON ASSOCIATES, INC.

Ref. Number: P20000017634

We have received your document for AR PATTON ASSOCIATES, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed 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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 423A00009699

