## 120000027567

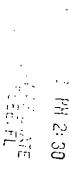
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Topose menerations to 1 mily emech.

Office Use Only



600428390476

05/02/24--01003--014 \*\*52.50



07/03/24

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATIO	Tucker & Green CP N:	'A PA	· · · · · ·			
P DOCUMENT NUMBER: _	20000027567					
The enclosed Articles of Ame	endment and fee are sub	omitted for filing.				
Please return all corresponder	nce concerning this mat	ter to the following:				
Leslie A. Tucker						
		(Name of Contact Perso	n)			
Leslie A. Tucker CPA PA						
		(Firm/ Company)				
2910 Russ Street						* 4
	· <del></del>	(Address)	<u>-</u>			
Marianna, Fl 32446						.;
		(City/ State and Zip Cod	e)	<del>_</del> .	· ·	呈:
leslie @ tuckero	greencpa. Com	M d for future annual report	notification)			PH 2: 30
For further information conce			,			
Leslie A. Tucker		850 at	0 4	82-7333		
(	Name of Contact Persor	1) (Ai	rea Code) (I	Daytime Tele	phone N	Number)
Enclosed is a check for the fo	llowing amount made p	ayable to the Florida Dep	artment of Sta	te:		
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certified	e of Status Copy al Copy is		
Mailing Address Amendment Section			Address			

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Tucker & Green CPA PA

(Name of Corporation as currently filed with the Flor	rida Dept. of State)	
P20000027567		
(Document N	lumber of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida S amendment(s) to its Articles of Incorporation:	tatutes, this <i>Florida Not F</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	ooration:	
Leslie A. Tucker CPA PA		The new
name must be distinguishable and contain the word "cor, "Company" or "Co." may not be used in the name.	poration" or "incorporate	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR.	<u>ESS</u> )	
		- <u>-</u>
		* <u>***</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		: · · · · · · · · · · · · · · · · · · ·
		military and the second
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		enter the name of the
new registered agent and/or the new registered on	ice address:	
Name of New Registered Agent:		
		lorida street address)
New Registered Office Address:	(1	iorna sireer address;
		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist		
I hereby accept the appointment as registered agent. I a	m familiar with and accept	the obligations of the position.
	Signature of New Regist	tered Avent if changing

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 X.Remove X.Add	PT         John D           V         Mike John S           SV         Sally S	<u>ones</u>			
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s		
l) Change Add	<u>VP</u>	Steven Green	2895 Watson Drive Marianna, FL 32446		
<ul> <li>X Remove</li> <li>2) Change</li> <li>Add</li> </ul>					
Remove 3 ) Remove Add Remove					
4) Change Add			2: E 0		
Remove 5) Change Add		<del></del>			
Remove 6) Change Add					
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
	<u></u>				

		-	<del></del>
			<del></del>
		_	
	-		<del></del>
	<u>-</u>		
			<del></del>
			_
			<u></u>
	•		<del></del>
		.7	
	,		
· <del></del>		,	
	<u>n,</u>	Ξ:	· 
	7	డ్లు	-
	<del></del>		
The date of each amendment(s) adoption: 5/1/2024 date this document was signed.			if other than the
Effective date if applicable:			
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, t document's effective date on the Department of State's records.	his date wil	l not be	e listed as the
Adoption of Amendment(s) (CHECK ONE)			
The amendment(s) was/were adopted by the members and the number of votes cast for the amwas/were sufficient for approval.	endment(s)	1	

_	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated 4/24/2024	
	Signature Leslie a Ducker	
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	LESLIE A. TUCKER	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	