P20000043634

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COVER LETTER

TO: Amendment Section *
Division of Corporations

NAME OF CORPO	RATION: Shine On Services	of North FL Inc			
DOCUMENT NUM	BER: P20000043634				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Michele Gloster				
	Name of Contact Person				
	Shine On Services of North FL Inc				
	Firm/ Company				
	2650 Dean Rd Apt 23				
	Address				
	Jacksonville, FL 32216				
		City/ State and Zip Code	,		
	shineon.servicesofntl@gmail	.com			
	E-mail address: (to be used for future annual report notification)				
For further information	on concerning this matter, pleas	se call:			
Michele Gloster		at (521-6301		
Name of Contact Person		Area Coe	le & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:		
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curren	tly filed with the Florida Dept. of State)	
220000043634	ay med with the Florida Dept. of State)	
(Decument Number	of Corporation (if known)	
	,	
ursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the following amendmen	
. If amending name, enter the new name of the corporation:		
	The new	
ame must be distinguishable and contain the word "corporation," Inc.," or Co.," or the designation "Corp," "Inc," or "Co", chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the word	
Enter new principal office address, if applicable:	4651 Salisbury Rd	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	Suite 400	
	Jacksonville, FL 32207	
	Jacksonville, FL 32207	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Jacksonville, FL 32207	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	Iress in Florida, enter the name of the	
(Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address.	Iress in Florida, enter the name of the	
(Moiling address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address registered agent and/or the new registered office address Name of New Registered Agent	Iress in Florida, enter the name of the	
(Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address registered agent and/or the new registered office address Name of New Registered Agent	lress in Florida, enter the name of the s:	

Signature of New Registered Agent, if changing

Check if applicable

 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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:

<u>A</u> Change	<u>P1</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>8V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	D	Tony Williams	2650 Dean Rd Apt 23
Add X Remove			Jacksonville, F1, 32216
2) Change	D	Niclotiasa Kelly	2650 Dean Rd Apt 23
Add X Remove 3) Change	<u></u>	_	Jacksonville, F1, 32216
Add Remove			
4) Change Add			
Remove 5) Change Add			
Remove Change Add			
Remove			

E. If amending or adding additional Arti- (Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
N/A	(,),
	
	
•	
	
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	
	

•

	06/03/2020	
The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
	3/2020	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will partment of State's records.	I not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopted action was not required.	pted by the incorporators, or board of directors without shareholder action and	i shareholder
☐ The amendment(s) was/were ador by the shareholders was/were sul	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east t	for the amendment(s) was/were sufficient for approval	
by	<u></u>	
	(voting group)	
07/24/2020		
Dated		
Signature Mio		
	rector, president or other officer - if directors or officers have not been	
	, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointe	ed fiduciary by that fiduciary)	
	Michele R Gloster	
-	(Typed or printed name of person signing)	
	President	
-	(Title of person signing)	