P20 0000 45031

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	isiness Entity Nar	me)
(Dc	ocument Number)	
Certified Copies		
		12/8/21
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January 28, 2021

JOSEPH LETSON LUCKY TRIO COMPANY 11412 WORCESTER RUN ESTERO, FL 33928

SUBJECT: LUCKY TRIO COMPANY

Ref. Number: P20000045031

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

THE DOCUMENT YOU HAVE SUBMITTED IS SPECIFICALLY USED FOR FLORIDA PROFIT BENEFIT CORPORATIONS OR FLORIDA PROFIT SOCIAL PURPOSE CORPORATIONS ONLY. PLEASE COMPLETE THE ATTACHED FORM AND RESUBMIT THIS FORM ONLY.

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.

Letter Number: 521A00002048

Susan Tallent Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION:	ky Trio Company 00045031
DOCUMENT NUMBER: V J OOG	000 45 031
The enclosed Articles of Amendment and fee are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
11412 E5te	Name of Contact Person Tris Company Firm/ Company Worcester Run Address FL 33928 City/ State and Zip Code
E-mail address: (to b	e used for future annual report notification)
For further information concerning this matter, p	please call:
Jusieph Letson	at (517) 402 -3745 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	ade payable to the Florida Department of State:
\$35 Filing Fee	& S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is cnclosed) (Additional Copy is enclosed)
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

of C	
(Name of Corporation as currently to	
P20000 45031	aled with the Florida Dept. of State)
(Document Number of C	Down and in a CiCles and A
(Document Number of C	corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Statutes</i> , the statutes of the statutes o	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Licky Tris Pool Company name must be distinguishable and contain the word "corporation," "cor	The new
name must be distinguishable and contain the word "corporation," "cor "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	npany," or "incorporated" or the abbreviation "Corp.," orofessional corporation name must contain the word
B. Enter new principal office address, it applicable:	11412 Worcester Run
(Principal office address MUST BE A STREET ADDRESS)	11412 Worcester Run Estero FL 33928
	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	11412 Worcester Run Estero FL 33928
	Fster FL 33928
D. If amending the registered agent and/or registered office addres	ss in Florida, enter the name of the
new registered agent and/or the new registered office address:	ना ना
Name of New Registered Agent	· · · · · · · · · · · · · · · · · · ·
•	CO
(Florida street	·
New Registered Office Address:	Florida
(C	iny) (Zip Code) —
•	
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the position.
* .	
Signature of New Regi	istered Agent, if changing
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)

Example:

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.

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jor	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change		<u> </u>		
Add				
Remove				
2) Change		_		
Add ,				
Remove 3) Change				
Add				
Remove				
4) Change		—		
Add				
Remove				
5) Change		_		
Add 1				
Remove				-
6) Change				
Add		_		

amendment provides for an exchange, reclassification, or cancellation of issued shares, isions for implementing the amendment if not contained in the amendment itself: if not applicable, indicate N/A)	ach additional shoots if nocossand	ticles, enter change(s	<u>s) here</u> :		
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	visions for implementing the ame	ndment if not contai	ned in the amendr	nent itself:	
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	h amendment(s) adoption: 12. 8.20 if other than the
ate this docume	ent was signed.
ffective date <u>if</u>	f applicable: 12 B. 20 (no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
	te inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ctive date on the Department of State's records.
doption of An	nendment(s) (CHECK ONE)
The amendme action was no	ent(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder of required.
	ent(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) holders was/were sufficient for approval.
	ent(s) was/were approved by the shareholders through voting groups. The following statement arately provided for each voting group entitled to vote separately on the amendment(s):
"The m	umber of votes cast for the amendment(s) was/were sufficient for approval
by	
	(voting group)
	Dated Feb 5 2021
	Signature
	(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)
	Toseph M Letson (Typed or printed name of person signing)
	_
	President
	(Title of person signing)