## P20 000061675

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: VINCENT CARA	CCI, INC	
DOCUMENT NU	JMBER: P20000061675		
	cles of Amendment and fee are su	ibmitted for filing.	
Please return all co	orrespondence concerning this ma	atter to the following:	
	ROBERT RECKLEIN		
		Name of Contact Person	1
	VANDERBILT COMPANII	ES, INC	
		Firm/ Company	
	11983 TAMIAMI TRAIL N	STE 138	
		Address	, · · · · · · · · · · · · · · · · · · ·
	NAPLES, FL 34110		
		City/ State and Zip Cod	e
	VANDERBILTRJR@ATT.	NET	
	E-mail address: (to be u	sed for future annual report	notification)
For further inform	ation concerning this matter, plea		594-6999
	me of Contact Person	at (239	)
	k for the following amount made		-
S35 Filing Fee	e S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

## Articles of Amendment to Articles of Incorporation of

17	INC	ENT	CAR	ACCI	INC

VINCENT CARACCE INC			
( <u>Name</u> e	of Corporation as curren	tly filed with the Florida Dept. of St	ate)
P20000061675			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s <i>Florida Profit Corporation</i> adopts th	ne following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
			The new
name must be distinguishable and contair "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Torp," "Inc," or "Co".	A professional corporation name m	abbreviation "Corp.," cust contain the word
B. Enter new principal office address,	if applicable:	14225 MANCHESTER DR	202 St
(Principal office address <u>MUST BE A S</u>		NAPLES, FL 34114	ARR I
			PAR L
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		14225 MANCHESTER DR	SSE TO
	<del></del>	NAPLES, FL 34114	9: 48 TATE:
D. If amending the registered agent at new registered agent and/or the new		ss:	<u>he</u>
Name of New Registered Agent			<del></del>
	14225 MANCHESTER	DR	<del>-</del>
	(Florida :	strect address)	
New Registered Office Address:	NAPLES	Florie	34114 da
		(City)	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agei	nt:	
I hereby accept the appointment as regist	tered agent. I am familia	r with and accept the obligations of the	position.
	Signature of New	Registered Agent, if changing	<del></del>
	inghamir ig men	manna marina ya minama	

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)

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 De	n <u>e</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
<u>X</u> Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) X Change	P		CARACCI, ANTONINO V. IV	14225 MANCHESTER DR.
Add				NAPLES, FL 34114
Remove				
2) Change		_		
Add				
Remove 3 ) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

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an amendment provides for an exchan provisions for implementing the amend	ge, reclassification, or care	amondment itself:	11 (3)
rovisions for implementing the amenu	nent if not comfamed in the	amendment usen.	
(if not applicable, indicate N/A)			
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	loption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this dapartment of State's records.	ite will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareholder acti-	on and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(flicient for approval.	s)
☐ The amendment(s) was/were appropriate the separately provided for	roved by the shareholders through voting groups. The following statemer each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
(By a di	1 /31/21  A traino / Carneir  rector, president or other officer – if directors or officers have not been	
	<ul> <li>d, by an incorporator – if in the hands of a receiver, trustee, or other coursed fiduciary by that fiduciary)</li> </ul>	rt
	ANTONINO V. CARACCI IV	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	