P20000096123

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COVER LETTER

Department of State Amendment Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: ZELLWOOD HOLDINGS, INC

•	, (/ // / /	stated articles of incorpora	
□ \$35.00	□ \$43.75	\$43.75	□ \$52.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
•	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate
			Status
		ADDITIONAL CO	PY REQUIRED

FROM:	SUZANNE S WILSON
7 10111.	Name (Printed or typed)
	900 SORRENTO ROAD, 501
	Address
	PLYMOUTH, FL 32768
	City, State & Zip
	407-335-2130
	Daytime Telephone number
	zellwoodholdings@gmail.com
	E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the document.



November 7, 2022

SUZANNE S WILSON 900 SORRENTO ROAD, 501 PLYMOUTH, FL 32768

SUBJECT: ZELLWOOD HOLDINGS INC.

Ref. Number: P20000086123

We have received your document for ZELLWOOD HOLDINGS INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must file an amendment not Restated Articles.

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.

Diane Cushing Senior Section Administrator

Letter Number: 122A00024965

www.sunbiz.org

Articles of Amendment

Articles of Incorporation

P20000086123

Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	of Corporation (if known) s Florida Profit Corporation adopts the following	ng amendment(
A. If amending name, enter the new name of the corporation:		The same
name 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 conto	The new ion "Corp.," in the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) (correction needed)	900 Plymouth Somen #501 Plymouth, FL 3276	to Rd 8-6422
D. If amending the registered agent and/or registered office add	dress in Florida, enter the name of the	
new registered agent and/or the new registered office addres Name of New Registered Agent	<u>(S:</u>	: 2022 D EC
(Florida s	treet address) -	≅
New Registered Office Address:	, Florida, City) (Zip	Gode) .
	•	2
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position	
Signature of New	Registered Agent, if changing	_
Chack if applicable		

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 Doe	
X Remove	<u>Y</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address [16]
1) Change	<u>P</u>	Suzanne S. Wilso	on 900 Sorrento Rd
X_ Add			#501
Remove			Plymouth, FL 32768
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary	v). (Be specific)	
N/A		
<u> </u>		
~		
	<u> </u>	
	<u> </u>	
If an amendment provides for an e provisions for implementing the a	exchange, reclassification, or cance	ellation of issued shares, amendment itself:
(if not applicable, indicate N/A))	
N/A		
	<u> </u>	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> : (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, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
Dated 12/8/22 Signature Susanne Wilson	
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)	
SUZANNE S WILSON	<u>.</u>
(Typed or printed name of person signing)	
(Title of person signing)	
(Title of person signing)	