P20000093016

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nan	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		į

Office Use Only



500357057925

01/14/21--01015--017 **35.00

R WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Hitch It Inc		
DOCUMENT NUM	BER:		
The enclosed Articles	of Amendment and fee are sub	unitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	Neal Hutchinson		
		Name of Contact Person	1
	NHLF		
		Firm/ Company	
	PO Box 51494		
		Address	
	Jacksonville Beach, FL 3224	0	
		City/ State and Zip Cod	e
	nhlawtinance@gmail.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Neal Hutchinson		at (<u>904</u>	307 9627
Name	of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Dep	partment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An	ailing Address nendment Section vision of Corporations	Amen	Address dment Section on of Corporations

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

Articles of Amendment to Articles of Incorporation of

m) ration adopts the following amendment(s) Thenew orated" or the abbreviation "Corp.," ration_name_must_contain_the_word
The new orated or the abbreviation "Corp.,"
The new orated or the abbreviation "Corp.,"
Thenew orated" or the abbreviation "Corp.,"
orated" or the abbreviation "Corp.,"
orated" or the abbreviation "Corp.,"
orated" or the abbreviation "Corp.," ration name must contain the word
the name of the
, Florida (Zip Code)
(54)

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 = ChiefExecutive 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 Do	<u>૦૯</u>	
X Remove	<u>v</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally Sr		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_	N/A all	
Add				
Remove				
2) Change		_ _		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_	<u> </u>	
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (If not applicable, indicate N/A)	(Attach additional:	dding additional Articles, enter change(s) here: sheets, if necessary). (Be specific) cles of Incorporation of Hitch It Inc. (the "Corporation") is amended so that Article IV	
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)	<u> </u>		
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
	provisions for it (if not applie	mplementing the amendment if not contained in the amendment itself:	
	/A 		

The data of each amendme	ot(s) adoption:, if other than
date this document was sign	d.
Effective date <u>if applicable</u>	
	(no more than 91) days after amendment file date)
Note: If the date inserted idocument's effective date o	this block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s	(CHECK ONE)
The amendment(s) was/v action was not required.	ere adopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/by the shareholders was	were adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
☐ The amendment(s) was/ must be separately prov	vere approved by the shareholders through voting groups. The following statement ded for each voting group entitled to vote separately on the amendment(s):
"The number of v	tes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
9,	(voting group)
	Jan. 9, 2021
Dated	
Signatur	
5.5	(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)
	Jonathan Vince
	(Typed or printed name of person signing)
	Incorporator
	(Title of person signing)