## P21000003689

(Requ	estor's Name)	
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Special Instructions to Fil	ing Officer:	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF COR	PORATION: The Blessed Tree,	inc.			
DOCUMENT NU	JMBER: P2100003689				
The enclosed Artic	cles of Amendment and fee are su	ibmitted for filing.			
Please return all co	orrespondence concerning this ma	atter to the following:			
	Richard P. Greene				
	Name of Contact Person				
	Time Capital Consulting, Inc.				
	<del> </del>	Firm/ Company			
	155 Quail Cove Blvd. #1609				
	<del></del>	Address	- · · · · · · · · · · · · · · · · · · ·		
	Lake Lure, North Carolina 28	8746			
	·	City/ State and Zip Cod	e		
		•			
	rpgreene1228@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further inform	ation concerning this matter, plea	se call:			
Richard P. Greene	:	954 at (	257-2614		
Na	me of Contact Person		de & Daytime Telephone Number		
Enclosed is a chec	k for the following amount made	payable to the Florida Dep	artment of State:		
S35 Filing Fee	e ☐\$43.75 Filing Fee & Certificate of Status	S43.75 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 Tallahassee, FL 32314		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassec N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

## (Name of Corporation as currently filed with the Florida Dept. of State) P21000003689 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: not applicable (N/A) The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered 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)

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	PT Jo	hn Doc	
X Remove	<u>v</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP,D	Richard P. Greene	155 Quail Cove Blvd. #1609
Add			Lake Lure, NC 28746
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change	<del></del>		
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5) Change			
Add			
Remove			
6) Change			
Add			
Pamova			

E. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
N/A	
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	···
F. If an amendment provides for an exchange, reclassification, or cancellation of issued sha	res,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
N/A	
19/7	
	<del></del>

	N/A	
The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
N/A Effective date <u>if applicable</u> :		
micetive date <u>ir appricable</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adoraction was not required.	nted by the incorporators, or board of directors without shareholder a	ction and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendme ficient for approval.	
	oved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	2022 1.16. 22 3ALL
"The number of votes cast (	or the amendment(s) was/were sufficient for approval	22
by		AA G
,	(voting group)	
November-1	4 2022	لري د د
Dated		
Signature	Just Dreone	
Signature	ector, president or other officer – if directors or officers have not bee	en
	by an incorporator – if in the hands of a receiver, trustee, or other co	
	d fiduciary by that fiduciary)	
	Richard P. Greene	
-	(Typed or printed name of person signing)	
•	/P, D	
-	(Title of person signing)	<del></del>