

11/7/22, 1:35 PM

Division of Corporations

P21000018403

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H22000380444 3)))



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To:
Division of Corporations
Fax Number : (850)617-6380

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
SKYRIDGE RANCH AND LAND INCORPORATED**

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RECEIVED

2022 NOV -8 AM 7:48

2022 NOV -8 11:10:41

11/9/2022

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SKYRIDGE RANCH AND LAND INCORPORATED

DOCUMENT NUMBER: P21000018403

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MICHAEL MOUCHEBOEUF

Name of Contact Person

SKYRIDGE RANCH AND LAND INCORPORATED

Firm/ Company

290 nieuport dr

Address

vero beach, FL 32968

City/ State and Zip Code

wftaxes.office@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL MOUCHEBOEUF

at (954) 798-1123

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
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(Additional Copy
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|---|--|---|--|

Mailing Address

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

850-617-6381

11/8/2022 11:06:19 AM PAGE 1/001 Fax Server



November 8, 2022

FLORIDA DEPARTMENT OF STATE

Division of Corporations

SKYRIDGE RANCH AND LAND INCORPORATED

290 NIEUPORT DRIVE

VERO BEACH, FL 32968

SUBJECT: SKYRIDGE RANCH AND LAND INCORPORATED

REF: P21000018403

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You can check only one (1) box regarding the adoption of amendment.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

FAX Aud. #: H22000380444
Letter Number: 022A00025030

Articles of Amendment
to
Articles of Incorporation
of

2022.07-8 11:10:41

SKYRIDGE RANCH AND LAND INCORPORATED

(Name of Corporation as currently filed with the Florida Dept. of State)

P21000018403

(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:

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."

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**)

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: _____, Florida _____
(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) (c), 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 John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>DPS</u>	<u>MICHAEL MOUCHEBOEUF</u>	<u>290 NIEUPORT DRIVE</u>
<input type="checkbox"/> Add			<u>VERO BEACH, FL 32968</u>
<input checked="" type="checkbox"/> Remove			
2) <input checked="" type="checkbox"/> Change	<u>DPS</u>	<u>NICHOLAS DELLAGROTTA</u>	<u>290 NIEUPORT DRIVE</u>
<input type="checkbox"/> Add			<u>VERO BEACH, FL 32968</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>DVP</u>	<u>AMPARO X DEL MOUCHEBOEUF</u>	<u>290 NIEUPORT DRIVE</u>
<input checked="" type="checkbox"/> Add			<u>VERO BEACH, FL 32968</u>
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

The date of each amendment(s) adoption: 11/07/2022, if other than the date this document was signed.

Effective date if applicable: _____
(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 will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ 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 _____."
(voting group)

Dated: 11/07/2022

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)

Michal Marchboet

(Typed or printed name of person signing)

DPS

(Title of person signing)