P21 0000022729

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:



800367230318

06/01/21--01041--012 **35.00

PILED

2021 JUN -1 AM 3: 32

SECRETARY OF STATE

Office Use Only

78/21

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: Golden Magnolia I	Realty Corp	
	MBER: P210000022729		
	les of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	Marianna Gorshelev		
		Name of Contact Person	
	Golden Magnolia Realty Cor	p	
		Firm/ Company	_
	1 Rockefeller Drive		
		Address	-
	Palm Coast, FL 32164		
		City/ State and Zip Code	2
	rjones@jonescpa.tax		
		sed for future annual report	notification)
	tion concerning this matter, pleas	se call:	
Randolph F Jones		at (<u>904</u>	
Nan	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curre	itly filed with the Flor	ida Dept. of State)	
221000022729			
(Document Number	of Corporation (if know	<u></u>	
	•		
ursuant to the provisions of section 607,1006, Florida Statutes, the Articles of Incorporation:	is Florida Profit Corpo.	ration adopts the follow	ing amendmer
. If amending name, enter the new name of the corporation:			
			444
ame must be distinguishable and contain the word "corporation,"	"company," or "incorp	orated" or the abbrevia	The new tion "Corp"
Inc.," or Co.," or the designation "Corp," "Inc." or "Co", chartered," "professional association," or the abbreviation "P.s	A professional corpor	ration name must cont	ain the word
		38	202
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)		<u> </u>	
Timequal office address sites i be A STREET ADDRESS)			
		<u> </u>	
. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		រុំកាំស	မှာ 🗓
		(<u>1</u>) A	
		<u>' </u>	32
		<u> </u>	·
. If amending the registered agent and/or registered office ad	dress in Florida, enter	the name of the	
new registered agent and/or the new registered office addre	<u>881</u>		
Name of New Registered Agent			
	- -		_
(Florida s	treet address)		
New Registered Office Address:		, Florida	
	(City)	(Zip	Code)
ew Registered Agent's Signature, if changing Registered Ager	<u>ıt:</u>		
hereby accept the appointment as registered agent. I am familian	with and accept the ob-	ligations of the position.	
			•
Signature of New	Registered Agent, if cha	nging	
heck 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: XChange	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	S	Igor Zis	112 Eric Dr
X Add			Palm Coast, FL 32164
Remove			
2) Change			
Add			-
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)			
	-			
				_
			-	= :
				
				
, , , , , , , , , , , , , , , , , , ,		_	-	
	-			
		<u>-</u>	<u> </u>	
			· 	
-	• ,		<u> </u>	
	<u> </u>		<u></u>	
-				
	<u>_</u>			
			_	
				
		ion or cancellation	of issued shares,	
an amendment provides for an excl	iange, reclassificat	ion, or cancenation		
<u>provisions for i</u> mplementing the ame	nange, reclassificat indment if not cont	ained in the amend	ment itself:	
an amendment provides for an excharge in an excharge in a second control of the same (if not applicable, indicate N/A)	nange, reclassificatendment if not cont	ained in the amend	ment itself:	
<u>rovisions for i</u> mplementing the ame	nange, reclassificat endment if not cont	ained in the amend	ment itself:	
<u>rovisions for i</u> mplementing the ame	nange, reclassificated and ment if not cont	ained in the amend	ment itself:	
<u>provisions for i</u> mplementing the ame	nange, reclassificated the control of the control o	ained in the amend	lment itself:	
<u>provisions for i</u> mplementing the ame	nange, reclassificated the control of the control o	ained in the amend	ment itself:	
<u>rovisions for i</u> mplementing the ame	nange, reclassificated and ment if not cont	ained in the amend	lment itself:	·-
<u>provisions for i</u> mplementing the ame	nange, reclassificated and ment if not cont	ained in the amend	ment itself:	
provisions for implementing the ame	nange, reclassificated and ment if not cont	ained in the amend	ment itself:	
provisions for implementing the ame	nange, reclassificated and ment if not cont	ained in the amend	ment itself:	
provisions for implementing the ame	nange, reclassificated and ment if not cont	ained in the amend	ment itself:	
provisions for implementing the ame	nange, reclassificated and ment if not cont	ained in the amend	lment itself:	
provisions for implementing the ame	nange, reclassificated and ment if not cont	ained in the amend	ment itself:	
an amendment provides for an exchorovisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassificated and ment if not cont	ained in the amend	ment itself:	

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requiren Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the sufficient for approval.	amendment(s)
☐ The amendment(s) was/were a must be separately provided f	pproved by the shareholders through voting groups. The follow or each voting group entitled to vote separately on the amenda	wing statement nent(s);
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
bv		
	(voting group)	
Dated	5 25. Q1.	
selec	director, president or other officer – if directors or officers ha led, by an incorporator – if in the hands of a receiver, trustee, on the fiduciary by that fiduciary)	ve not been or other court
	Marianna Gorshelev	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	