## P21666628364

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A. BUTLER OCT 1 1 2022

## **COVER LETTER**

TO: Amendment Section Division of Corporations

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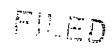
NAME OF CORPOR	RATION: Compass Sleep	Products, Inc.			
	BER: P21000028364				
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	Benjiman D. Read				
	-	Name of Contact Persor	1		
	Compass Sleep Produ	ucts, Inc.			
	Firm/ Company				
	2930 Kerry Forest Pkwy, Suite 101				
	Address				
	Tallahassee, FL 3230	9			
		City/ State and Zip Code	e		
	bread@twinoaksfl.org				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, plea:	se call:			
Benjiman D. Read	1	at ( 850-643-7	7768		
Name (	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment 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)		

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee

## Articles of Amendment to Articles of Incorporation of



Compass Sleep Products, Inc.	2022 OCT 11 PM 2: 16
(Name of Corporation	n as currently filed with the Florida Dept. of State)
P21000028364	THE PERMIT
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:
	The new
name must be distinguishable and contain the word "con "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	rporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word viation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD.</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u></u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florida, enter the name of the office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
	I am familiar with and accept the obligations of the position.
Signa	iture 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; F = 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.

X Change	<u>PT</u> <u>John</u>	ı <u>Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	Thomas D. Freeman	784 SW Greenville Hills Road
Add			Greenville, FL 32311
X Remove	CEO	Benjiman D. Read	2930 Kerry Forest Pkwy, Suite 101
2) Change Add	<u>CFO</u>	Benjiman D. Nead	Tallahassee, FL 32309
Remove 3 ) Change	CEO_	Ricky Riley	784 SW Greenville Hills Road
X Add			Greenville, FL 32311
Remove 4) Change	<u>P</u>	John McEachern	2930 Kerry Forest Pkwy, Suite 101
X Add			Tallahassee, FL 32309
Remove	<u>D</u>	Donald Read	2930 Kerry Forest Pkwy, Suite 101
X Add			Tallahassee, FL 32309
Remove			
6) Change			
Add			
Remove			

	ticles, enter change(s) he (Be specific)		
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f an amendment provides for an exc provisions for implementing the am	hange, reclassification, o	r cancellation of issue	ed shares,
provisions for implementing the am	endment if not contained	l in the amendment it:	<u>self:</u>
(if not applicable indicate \$\text{N4}\$)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
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(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			

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The date of each amendment(s) add	ption: 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 blo document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will not be listed as the artment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.
	oved by the shareholders through voting groups. The following statement such voting group entitled to vote separately on the amendment(s):
"The number of votes east fo	or the amendment(s) was/were sufficient for approval
by:	
	(voting group)
Dated October 1	0, 2022
Signatur	
(By a dir selected.	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
	Benjiman D. Read
_	(Typed or printed name of person signing)