## P21000041664

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: COTO CAZA HU	NTING PLANTATION IN	IC	
DOCUMENT NUM	BER: P21000041664			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	itter to the following:		
	FRANK COTO III			
	n			
Firm/ Company				
	_			
	TAMPA, FL 33625			
		City/ State and Zip Cod	e	
	bev@lincolnlend.com			
	E-mail address: (to be us	sed for future annual report	notification)	
	on concerning this matter, pleas			
FRANK COTO III	<u>.</u>	at (	_) 765-1239	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Dep.	artment of State:	
S35 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)	
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Division The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	

## Articles of Amendment to Articles of Incorporation of

COTO CAZA HUNTING PLANTATION INC

· · · · · · · · · · · · · · · · · · ·	ly filed with the Florida Dept. of State)
P21000041664	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
COTO CAZA TREE FARM INC J	The new
name must be distinguishable and contain the word "corporation," "lnc.," or Co.," or the designation "Corp," "Inc." or "Co". "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	FRANK COTO III
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	6944 W LINEBAUGH AVE SUITE 101
	TAMPA, FL 33625
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A CC
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent N/A	
(Florida st	reet 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	
Signature of New R	Registered Agent, if changing
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	

address of each Officer (Attach additional sheets, Please note the officer/dit P = President; V = Vice Executive Officer; CFO = President, Treasurer, Dir Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove	if necess rector titl President Chief Fi ector wo in the fo ves the c	sary) le by the fit; T= Trec inancial C uld be PT llowing ni orporation	rst letter of the office thissurer; S= Secretary; Efficer. If an officer/dired.  D.  anner. Currently John  officer, Sally Smith is named	D= Director; TR= Tra ector holds more than Doe is listed as the P	one title, l ST and Mi	st the first letter ke Jones is liste	of each office he	dd.
Example: X_Change	<u>PT</u>	John Do	<u>e</u>					
X Remove	<u>v</u>	Mike Jo						
X Add	<u>sv</u>	Sally Sn	<u>nith</u>					
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s			
1) Change		_	N/A					
Add Remove							00 PD 24	
2) Change		_				1		,
Add							الله الله الله الله الله الله الله الله	
Remove 3) Change		_					<del></del>	•
Add								
Remove							<del></del>	
4) Change		_						
Add								
Remove								
5) Change		_						
Add					_		<del></del>	
Remove								

1) \_\_\_\_ Change

\_\_\_\_ Add

\_\_\_\_ Remove

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and

F. 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 shares provisions for implementing the amendment if not contained in the amendment itself:	\$		
(if not applicable, indicate N/A)			
N/A	<u> </u>		
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	08/27/2024	
The date of each amendment		, if other than the
date this document was signed		
Effective date if applicable:	08/27/2024	
ratective date <u>ii appiicapie</u> .	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, he Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without sharehold	ler action and shareholder
☐ The amendment(s) was/web by the shareholders was/web.	re adopted by the shareholders. The number of votes cast for the amendere sufficient for approval.	dment(s)
	re approved by the shareholders through voting groups. The following ad 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 <u>N/A</u>	<u>.</u>	SEC TX
	(voting group)	2074 SEC 17 SECKERA C
		그 불어 ㅠ
08/27 <i>i</i> Dated	2024	3. " · · · · ·
Signature	- ruy	
(B	y a director, president or other officer – if directors or officers have not lected, by an incorporator – if in the hands of a receiver, trustee, or oth spointed fiduciary by that fiduciary)	
	FRANK COTO III	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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