P21000042527

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COVER LETTER

TO: Amendment Section Division of Corporations

AME OF CORPO	Epilogue Nine, Inc DRATION:	: .		
OCUMENT NUM	P21000042527			
ie enclosed A <i>rticle</i>	s of Amendment and fee are su	bmitted for filing.		
ease return all corr	espondence concerning this ma	tter to the following:		
	Richard L. Brooks II, Esq.			
	St. Augustine Law Group, P.	Name of Contact Person	1	
	2740 US Highway 1 South	Firm/ Company		
	St. Augustine, Fl. 32086	Address		
		City/ State and Zip Code	e	
	rich@staugustinelawgroup.com			
	E-mail address: (to be us	sed for future annual report	notification)	
r further informati	on concerning this matter, plea	se call:		
lia Newton		9()4 at (990 - 7777	
Name	e of Contact Person			
closed is a check f	for 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		
Tallahassee, FL 32314		2415 N	N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of Epilogue Nine, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P21000042527 (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: (Civ) 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.

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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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
X 1) Change	I AL	John D. Brock	111 Walnut Street #17837
Add			Green Cove Springs, FL 32043 - 3443
Remove X 2) Change	VPS	Josiah F. Brock	111 Walnut Street #17837
Add			Green Cove Springs, FI. 32043 - 3443
Remove Change	VPSD	Sarah A. Brock	111 Walnut Street #17837
Add			Green Cove Springs, FL 32043 - 3443
Remove			
4) Change		_	
Add Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
	<u> </u>
-	
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
	Ω/A
	• •

The date of each amendment(s) adoption:	, if other than the
date this document was signed 07/02/2021	
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 document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	and shareholder
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):	u
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
7/6/2021 11:37 AM EDT Dated	
Signature Josiale Brock	
(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)	
Josiah Brock	
(Typed or printed name of person signing)	
Vice President	
(Title of person signing)	