## P21000063083

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FROM THE ACCOUNTS

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Growing Grace Incorporated
DOCUMENT NUMBER: <u>P2100063083</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Greshondra Shellman Name of Contact Person
1901 Baynesdows Cir F 430 Address
City/ State and Zip Code  Greshonda Shellman Quartoo Con E-mail address: (to be used for future annual report notification)
for further information concerning this matter, please call:
Greshon In Shellman at 904, 763 4290 Name of Contact Person Area Code & Daytime Telephone Number
inclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment

to **Articles of Incorporation** 

of	- 1 1
- Growing Grace +	y Corpora Led
DILAMA CA AGA	y med with the Florida Dept. of State) /:
(Document Number o	f 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:	
name must be distinguishable and contain the word "corporation," "a	The new
"Inc.," or Co.," or the designation "Corp," "Inc," or "Co", -> "chartered," "professional association," or the abbreviation "P.A."	1 professional corporation name must contain the word
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	11. ( )
(Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	
1. 11	<u>.</u>
Name of New Registered Agent N/A	
(Florida str	vet address)
New Registered Office Address: MA	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar w	
Signature of New Ro	egistered 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	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name  O	Address
1) Change	7	Greshondra Shellman	1113 Easy St
<u>X</u> Add			Jacksonville F1 32218
Remove			
2) Change	<del></del>	<del>.</del>	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach <i>additi</i>	or adding additional A onal sheets, if necessary,	). (Be specific)	<del></del>		
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lf an amenda	ent provides for an exc	dianas roelaecifias	tian ar aanaallati	on afticened charact	
provisions fo	r implementing the am	endment if not con	tained in the ame	ndment itself:	2
(if not ap	plicable, indicate N/A)				
NIA					
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					<del></del>
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	<del>-</del>		_ <del>.</del>		

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:  (no more than 90 days after amendment file date)	
(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 document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	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).	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
Dated8/4/102/	
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)	_
Greshondra Shellman	
(Typed or printed name of person signing)  President / Duner	
(Title of person signing)	