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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR		s, Inc.				
DOCUMENT NU	P21000093788 JMBER:					
The enclosed Artic	cles of Amendment and fee are su	ibmitted for filing.				
Please return all co	orrespondence concerning this ma	atter to the following:				
	Robert M. Fojo					
	Fojo Law	Name of Contact Person				
	264 South River Road, Suite	Firm/ Company 464				
	Bedford, NH 03110	Address				
		City/ State and Zip Co	ode			
	rfojo@fojolaw.com					
	E-mail address: (to be u	sed for future annual repo	ort notification)			
For further inform	ation concerning this matter, plea	se call:				
Robert M. Fojo		603 at (473-4694			
Name of Contact Person			Code & Daytime Telephone Number			
Enclosed is a chec	k for the following amount made	payable to the Florida De	epartment of State:			
Ճ \$35 Filing Fe	e □\$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 Tallahassee, FL 32314	Ame Divi: The 2413	et Address Indment Section Ission of Corporations Centre of Tallahassee S.N. Monroe Street, Suite 810 Islanssee, FL 32303			

Articles of Amendment to Articles of Incorporation

FILED

2022 JAN 27 AH 7: 32

(Name of Corporation as current	tly filed with the Florida Dept. of State)				
TALLAH SSCHOOL					
(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)				
A. If amending name, enter the new name of the corporation:					
	The new				
name must be distinguishable and contain the word "corporation," "Inc.," 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:					
(Principal office address <u>MUST BE A STREET ADDRESS</u>)					
C. Enter new mailing address, if applicable:	143 Marshall Street				
(Mailing address MAY BE A POST OFFICE BOX)	Tewksbury, MA 01876				
D. Kannadina the maintain described and the Control of the Control					
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address					
Name of New Registered Agent					
Name of New Registerea Agent					
(Florida e	(reet address)				
	eer dear casy				
New Registered Office Address:	, Florida				
	(City)				
New Registered Agent's Signature, if changing Registered Agen					
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position,				
Signature of New 1	Registered Ayent, 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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Secretary	Steven Woolsey	739 South 70 East Smithfield, UT 84335
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			<u> </u>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			-
Remove			

	Articles, enter chang v). (Be specific)			
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If an amendment provides for an e	vehanga radaccific	ation or cancellati	on of icenad charac	
provisions for implementing the a (if not applicable, indicate N/A	mendment if not co	ntained in the ame	ndment itself:	1
(if not applicable, indicate N/A)			
·				

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December 30, 2021 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 date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) 🙀 The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. ☐ 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 cast for the amendment(s) was/were sufficient for approval by _ (voting group)

Dated December 30, 2021

Peter Carlino

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)

(Title of person signing)

Peter Carlino

(Typed or printed name of person signing)

Vice President