on ida Deparimento i State Division of Corporations Elegannic Filing Cover She

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the lop and bottom of all pages of the document.

(((H220004217013)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: REGISTERED AGENTS INC.

Account Number : 120090000081

Phone Fax Number

(307)200-2803(855)330-1010

\*\*Enter the email addres\$ for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:	

## COR AMND/RESTATE/CORRECT OR O/D RESIGN PERFORMANCE TRIGGERS INC.

Certificate of S	atus	0
Certified Copy		0
Page Count		05
Estimated Char	Be	\$35.00



J. HORNE

JAN - 6 2023

Electronic Filing Menu

Corporate Filing Menu

Help

## Articles of Amendment to Articles of Incorporation of

2023 JAN -5 AM 10: 46

SECRETARY OF STANDARD SEE FINE SEE

## PERFORMANCE TRIGGERS INC.

(Name of Corp	oration as currently filed with the Florida Dept. of State)
P22000016737	51717.1
(1)	ocument Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, F its Articles of Incorporation:	orida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to
A. If amending name, enter the new name of t	he corporation:
	The new discorporation," "company," or "incorporated" or the abbreviation "Corp" Inc," or "Co". A professional corporation name must contain the word abbreviation "P.A."
B. Enter new principal office address, if appli (Principal office address MUST BE A STREET	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC)  D. If amending the registered agent and/or renew registered agent and/or the new registered agent.	vistered office address in Florida, enter the name of the
Name of New Registered Ayent	Tea whee addition
	(Florida street address)
New Registered Office Address:	, Florida
Register a control state cost.	(City) (Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag	Registered Agent: ent. I am familiar with and accept the obligations of the position.
	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.

address of each Officer: tAttach additional sheets, Please note the officer/dip P = President; V = Vice I Executive Officer; CFO = President, Treasurer, Dir Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove.	and/or D if necess vector titl President Chief Fi ector wor in the for ves the ce	irector being stary)  The by the first leter Treasure.  The inancial Officer all the PTD.  The inance allowing manner orporation, Sal	ter of the office title:	lirector being removed and title, name, and usive; C = Chairman or Clerk; CEO = Chief one title, list the first letter of each office held. 2ST and Mike Jones is listed as the V. There is hould be noted as John Doe, PT as a Change.
Example: X Change	<u>PT</u>	John Doe		
X Remove	$\underline{V}$	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Nam</u>	<u>ne</u>	<u>Addres</u> s
1) Change	Р	R	EV2A INC	7901 4TH ST N. STE 300
Add				ST. PETERSBURG, FL 33702
X Remove		ĺ		
2) Change	Р		HOLDINGS GROUP LLC	7600 NW 5th Place
X Add				Gainesville FL 32607
Remove 3) Change		-		
Add				
Remove				
4) Change		- <del></del>	Windows I Walleton	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		- <del> </del>		
Add				
Remove				

. If amending or adding additional Articles, (Attach additional sheets, if necessary). (Be	e specific)
· · · · · · · · · · · · · · · · · · ·	
	-
<del></del>	
If an amendment provides for an exchange	reclassification, or cancellation of issued shares.
provisions for implementing the amendm (if not applicable, indicate N/A)	ent if not contained in the amendment itself:
	I

.

The date of each amendment(s) adoption:	, if other than th
late this document was signed.	
Effective date <u>if applicable</u> :	
	no more than 90 days after amendment file date)
Note: If the date inserted in this block does not document's effective date on the Department of S	meet the applicable statutory filing requirements, this date will not be listed as thate's records.
Adoption of Amendment(s) (CHE	CK ONE)
The amendment(s) was/were adopted by the in action was not required.	corporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the sh by the shareholders was/were sufficient for ap	areholders. The number of votes east for the amendment(s) proval.
	shareholders through voting groups. The following statement roup entitled to vote separately on the amendment(s):
"The number of votes cast for the amend	ment(s) was/were sufficient for approval
by	
tvotin	g group)
Dated 12/15/2022	
Signature <u>Anthony</u>	McKnight nt or other officer - if directors or officers have not been
(By a director, preskl selected, by an incorp appointed fiduciary b	orator – if in the hands of a receiver, trustee, or other court
Anthor	y McKnight
	ped or printed name of person signing)
Officer	
	tle of person signing)