P22000020123

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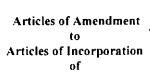
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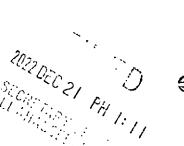
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: TroughSaver, Inc.					
DOCUMENT NUM	BER: P22000020623					
	s of Amendment and fee are sul	bmitted for filing.				
Please return all corre	espondence concerning this mat	tter to the following:				
	Kim Collier					
		Name of Contact Persor				
	TroughSaver, Inc.					
	Firm/ Company					
	16703 Early Riser Avenue, Suite 212					
	Address					
	Land O' Lakes, FL 34638					
	City/ State and Zip Code					
	troughsaver@gmail.com					
		ed for future annual report	notification)			
For further information	on concerning this matter, pleas		755-3305			
Name	of Contact Person	at (813) 755-3305 Area Code & Daytime Telephone Number				
Enclosed is a check f	or the following amount made p					
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810				

Tallahassee, FL 32303







TroughSaver, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P22000020623 (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: 16703 Early Riser Avenue, Suite 212 (Mailing address MAY BE A POST OFFICE BOX) Land O' Lakes, FL 34638 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: 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. 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)

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>	<u>John Doe</u>	
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
I) X Change	P	Britta L. Anderson	25921 Haddon Road
Add			Brooksville, FL 34601
Remove			
2) Change	v	Brian A. Collier	16754 Courtyard Loop
X Add		-	Land O Lake, FL 34638
Remove 3) X Change	S	Karen E. Anderson	6013 County Road 6
Add			Independence, MN 55359
Remove			
4) Change	T	Kim R. Collier	16754 Courtyard Loop
X Add			Land O Lake, FL 34638
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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an amendment prov	ides for an exc	hange, recl	lassification	. or cancella	tion of issue	ed shares,	
rovisions <u>for implem</u>	enting the amo	endment if	not contair	ed in the an	nendment it	self:	
(if not applicable,	indicate N/A)						
		<u> </u>				· <u> </u>	
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	December 15, 2022	
The date of each amendment date this document was signed		, if other than the
	December 15, 2022	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendnere sufficient for approval.	nent(s)
	re approved by the shareholders through voting groups. The following standard 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)	
12/16	/2022	
Dated Signature	Karn Elinderia	
	y a director, president or other officer - if directors or officers have not b	
	elected, by an incorporator – if in the hands of a receiver, trustee, or other oppointed fiduciary by that fiduciary)	court
	Karen E Anderson	
	(Typed or printed name of person signing)	
	Secretary	333333
	(Title of person signing)	