## P22000024557

| (Requestor's Name)                      |  |  |  |  |
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| (City/State/Zip/Phone #)                |  |  |  |  |
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| PICK-UP WAIT MAIL                       |  |  |  |  |
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| (Business Entity Name)                  |  |  |  |  |
| (555555165, 1556)                       |  |  |  |  |
| (Document Number)                       |  |  |  |  |
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| Special Instructions to Filing Officer: |  |  |  |  |
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Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FL

NOV 26 PM 2: 2

M

## **COVER LETTER**

| TO: Amendment Section Division of Corporations  |   |                     |
|---|---|---------------------|
| NAME OF CORPORATION: Shanda Gracey, PA  DOCUMENT NUMBER: P22 0000 24557   |   |                     |
| The enclosed Articles of Amendment and fee are submitted for filing.  |   |                     |
| Please return all correspondence concerning this matter to the following:   |   |                     |
| Shanda Gracey Name of Contact Person  |   |                     |
| REIMAX GOLD Firm/Company  |   |                     |
| 140 NW California Blvd.   |   |                     |
| Port ST. Lucie, FL. 34986 City/State and Zip Code   | 2024 1<br>SEC!                                  | ma č <sub>r</sub> a |
| E-mail address: (to be used for future annual report notification)  | 2024 NOV 26 PM 2:<br>SECRETARY OF STALLAHASSEE. |                     |
| For further information concerning this matter, please call:  | PM 2:<br>(SSEE,                                 | I                   |
| Shanda Gracey at (772), 924-4004 Name of Contact Person Area Code & Daytime Telephone Number  | TATE FL   |                     |
| Enclosed is a check for the following amount made payable to the Florida Department of State:   |   |                     |
| \$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed) |   |                     |

Street Address

Amendment Section

Division of Corporations
The Centre of Tallahassee

Tallahassee, FL 32303

2415 N, Monroe Street, Suite 810

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

## Articles of Amendment to

## Articles of Incorporation of

| Shanda T Lamb, PA   |  |  |  |  |  |
|---|--|--|--|--|--|
| Shanda Lamb, YH (Name of Corporation as currently filed with the Florida Dept. of State)  |  |  |  |  |  |
| P22000024557  |  |  |  |  |  |
| (Document Number of Corporation (if known)  |  |  |  |  |  |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:  | Florida Profit Corporation adopts the following amendment(s) to  |  |  |  |  |
| A. If amending name, enter the new name of the corporation:   |  |  |  |  |  |
| Shanda Gracey PA  | The new  |  |  |  |  |
| name must be distinguishable and contain the word "corporation," "c<br>"Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A<br>"chartered," "professional association," or the abbreviation "P.A." | ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word  |  |  |  |  |
| B. Enter new principal office address, if applicable:   | 140 NW California Blvd.  |  |  |  |  |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )   | Port ST. Lucie Fl. 34986   |  |  |  |  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)   | Toot Torrey Pines Che T |  |  |  |  |
| D. If amending the registered agent and/or registered office addr   | ess in Florida enter the name of the   |  |  |  |  |
| new registered agent and/or the new registered office address:  | m  |  |  |  |  |
| Name of New Registered Agent Shanda   | Gracey, PA_  |  |  |  |  |
| 7007 TOCC   | Gracey, PA<br>ey Pines Cir Port St. Lucie,<br>eradiress) FL-34986  |  |  |  |  |
| New Registered Office Address: Port ST- W   |  |  |  |  |  |
|   | City) (Zip Code)   |  |  |  |  |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w  Nignature of New Re   | ith and accept the obligations of the position.  gistered 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> | John Doe      |   |
|----------------------------|-----------|---------------|---|
| X Remove                   | <u>v</u>  | Mike Jones    |   |
| X Add                      | <u>sv</u> | Sally Smith   |   |
| Type of Action (Check One) | Title     | <u>Name</u>   | <u>Addres</u> s                         |
| 1) K Change                | P         | Shanda Gracey | Port ST. Lucie, FL 34986                |
| Add                        |           |               | Port ST. Lucie, FL 34986                |
| Remove                     |           |               |   |
| 2) Change                  |           |               | SEC :::                                 |
| Add                        |           |               | SECKETAL                                |
| Remove 3 ) Change          |           |               | - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 |
| Add                        |           |               | PH 2:                                   |
| Remove                     |           |               |   |
| 4) Change                  |           |               |   |
| Add                        |           |               |   |
| Remove                     |           |               |   |
| 5) Change                  |           |               |   |
| Add                        |           |               |   |
| Remove                     |           |               |   |
| 6) Change                  |           |               |   |
| Add                        |           |               |   |
| Remove                     |           |               |   |

| The date of each amendment(s) adoption:  | , if other than the                                      |
|--|--|
| date this document was signed.   | 11 (4116) (414) (416                                     |
| Effective date if applicable:  |  |
| (no more than 90 days after amendment file date)   | <del></del>  |
| <b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will r 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 staction was not required.  | nareholder   |
| ☐ 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 Shanda Gracey, PA / President-  | 2024 N<br>SECI   |
| 11/14/21   | FILTU<br>2024 NOV 26 PM 2<br>SECRETARY OF<br>TALLAHASSEE |
| Dated  | 75 P 11  |
| Signature  | PH 2   |
| (By a director, president or other officer - if directors or officers have not been  | 2: 25<br>E. FL   |
| selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)   | L IE   |
| · · · · · · · · · · · · · · · · · · ·  |  |
| Shanda Grac-ey (Typed or printed name of person signing)   | <del></del>  |
|  |  |
| President  |  |
| (Title of person signing)  |  |