P22000051127

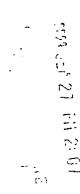
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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08/02/23-+01017--008 ++48.75







August 28, 2023

MICHAEL MILLER 403 3RD ST SW WINTER HAVEN, FL 33880

SUBJECT: GRIFFITH EARTH WORKS INC

Ref. Number: P22000051127

We have received your document for GRIFFITH EARTH WORKS INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Florida Profit Corporation. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Morgan E Lovett Regulatory Specialist II

Letter Number: 823A00020053

SEP 27 2023

Articles of Amendment Articles of Incorporation of

	GRIFFITH EART	H WORKS INC	
(Name of	Corporation as currently	filed with the Florida Dept. of State)	
	P22000051	127	
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this F	lorida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new nam	ne of the corporation:		
N/A			_The new
name must be distinguishable and contain the "Inc.," or Co.," or the designation "Co. "chartered," "professional association," o	rp," "Inc," or "Co". A	empany," or "incorporated" or the abbreviati professional corporation name must contain	on "Corp.," in the word
B. Enter new principal office address, if	applicable:	5830 Lake Park Rd	
(Principal office address MUST BE A STREET ADDRESS)		Lake Wales, FL 33898	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		5830 Lake Park Rd	
		Lake Wales, FL 33898	
D. If amending the registered agent and new registered agent and/or the new Name of New Registered Agent		ess in Florida, enter the name of the	773 867 27
	(Florida stree	ot address!	
	(1 lorida direc	•	
New Registered Office Address: _		, Florida City) (Zip	Code) _
			(1)
New Registered Agent's Signature, if cha I hereby accept the appointment as register		th and accept the obligations of the position.	
	N/A		
	Signature of New Reg	gistered Agent, if changing	_
Check if applicable ☐ The amendment(s) is/are being filed pur	suant to s. 607.0120 (11) (e	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)	<u>Title</u>	<u>Name</u>	Address
l) Change	<u>VP</u>	CHARLES GRIFFITH II	203 VOLUSIA DR
Add			WINTER HAVEN, FL 33884
X Remove			
2) Change			
Add			
Remove 3) Change	-		
Add			
Remove			27
4) Change			53
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		•	

f amending or adding additional Artic Attach additional sheets, if necessary).		
/A		
		
<u>, , , , , , , , , , , , , , , , , , , </u>		
		
	and the second s	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		•
CHARLES GRIFFITH III HOLI	DS 100% IF THE BUSINESS AND 100% OF THE SHARE	SOF
THE STOCKS STARTING 7/06	5/2023.	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	۵۰

The date of each amendment(s) adoption: $\frac{7/6/3}{}$, if other than the
date this document was signed.	
Effective date if applicable: 7/6/23 (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) (<u>CHECK ONE</u>)	
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 cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
9/21/23	
Dated $9/21/33$	
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)	_
Charles Griffith III (Typed or printed name of person signing)	
(Typed or printed name of person signing)	4
President (Title of person signing)	1673 52 27
(Title of person signing)	P
	<i>5</i> 3
	41. 9
	L.,

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