P22000089478

(Requestor's Name)				
(Address)				
(Ac	dress)			
(Cit	ty/State/Zip/Phone	e #)		
PiCK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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COVER LETTER

NAME OF CORPORATION: N. Flovida Capital, Corp. DOCUMENT NUMBER: P22000089478						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Brad Bond Name of Contact Person N. Florida Copital Coep. Firm/ Company 2927 NW NASH RD Address LALCE City/ Ft 32055 City/ State and Zip Code Email address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Brad Bond at (386) 898.4498						
Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)						

Mailing Address

TO: Amendment Section

Division of Corporations

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

Articles of Amendment Articles of Incorporation

		حہ
	Articles of Amendment	
	to	
	Articles of Incorporation	(3)
	of	
N. FLovida C	apital Coko.	Florida Dept. of State)
P22000089	2478	
1 2200000	(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	, Florida Statutes, this <i>Florida Profit C</i>	Corporation adopts the following amendment(s) t
A. If amending name, enter the new name	of the corporation:	
T8T, CORD.		The new
name must be distinguishable and contain the v "Inc.," or Co.," or the designation "Corp, "chartered," "professional association," or th	" "Inc," or "Co". A professional o	ncorporated" or the abbreviation "Corp.," corporation name must contain the word
B. Enter new principal office address, if ap (Principal office address <u>MUST BE A STRE</u>		
C. Enter new mailing address, if applicabl (Mailing address MAY BE A POST OFF		
D. If amending the registered agent and/or new registered agent and/or the new reg		enter the name of the
Name of New Registered Agent		
_	(Florida street address)	
More Presistant Office Address		Wlorida
New Registerea Office Address.	(City)	(Zip Code)
	·	·
New Registered Agent's Signature, if chang I hereby accept the appointment as registered	ing Registered Agent: 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)

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>	Name Traves	<u>Addres</u> s
1) Change	P/CE	Tames EO Bradford Bond	2927 NW NASH RD
Add Remove			LALLE City, Fr. 32055
2) Change	5/7/0	CFO Julie A. TAit	2927 NW NASHRO LAKE City, IL 32055
Remove Change Add	7	Parker Tait	2927 NW MASHRD LALIC City, FL 32055
Remove 4) Change Add	<u>VP</u>	Packer Tait	2927 NW NASHIND LALE City F 32055
Remove 5) Change			
Add Remove 6) Change			
Add Remove			

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
<u>-</u>	
	
	
If an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) a	doption:	, 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 bedocument's effective date on the De	clock does not meet the applicable statutory filing requirements, epartment of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without sharehol	der action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amerafficient for approval.	idment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Signature(By a d	irector, president or other officer – if directors or officers have not by an incorporator – if in the hands of a receiver, trustee, or of tool fiduciary by that fiduciary)	
	Tanes Bredfurd Bond (Typed or printed name of person signing)	
	(Title of person signing)	