P2200093619

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

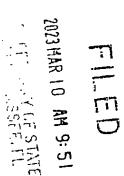
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORP	ORATION: Amanda Amett Ed	wards, PA	
	MBER: P22000093619		
The enclosed Artic	les of Amendment and fee are su	bmitted for filing.	
Please return all co	rrespondence concerning this ma	tter to the following:	
	Amanda Arnett Edwards		
		Name of Contact Person	1
	Amanda Arnett Edwards, PA		
		Firm/ Company	
	300 CR 207A	• •	
		Address	
	East Palatka, FL 32131		
		City/ State and Zip Code	£
	a.arnett.edwards@gmail.com		
	~-	sed for future annual report	notification)
	2 222.000. (10 00 00	,	,
For further informa	tion concerning this matter, pleas	se call:	
Amanda Edwards		at (904	814-2115
Nan	ne of Contact Person		de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
7 C P	Mailing Address Amendment Section Division of Corporations LO. Box 6327 Tallahassee, FL 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Amanda Arnett Edwards, PA		
(Name of Corporation	as currently filed with the Florida	Dept. of State)
P22000093619		
(Documen	nt Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	tatutes, this <i>Florida Profit Corporati</i>	on adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:	
N/A		The new
name must be distinguishable and contain the word "corp "Inc.," or Co.," or the designation "Corp," "Inc.," o "chartered," "professional association," or the abbrevio	or "Co". A professional corporati	
B. Enter new principal office address, if applicable:	N/A	~3
(Principal office address MUST BE A STREET ADDR	ESS)	523
		T R
C. Enter new mailing address, if applicable:		# 2 m
(Mailing address MAY BE A POST OFFICE BOX)	N/A	SSE A
		9:
		<u> </u>
		· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		e name of the
Name of New Registered Agent N/A		
	(Florida street address)	
New Registered Office Address:		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist	ered Agent:	
I hereby accept the appointment as registered agent. I a		ations of the position.
Sionatu	re of New Registered Agent, if chang	ving

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 Do	<u>se</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
I) Change	S	_	Ernest Edwards	300 CR 207A
X Add				East Palatka, FL 32131
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		-		
Add				
Remove				
5) Change		_		33333333
Add				
Remove				
6) Change				
Add				
Remove				

The date of each amendment	N/A (s) adoption: , i	f other than the
date this document was signed.	·/ · · · · · · · · · · · · · · · · · ·	
	N/A	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date will not the Department of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without shareholder action and shar	eholder
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement of 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	(voling group)	
Dated March	14, 2023	
Signature (Inanda Quett Edwards	
se	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court spointed fiduciary by that fiduciary)	
	Amanda Arnett Edwards	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

If amending or adding additional Article (Attach additional sheets, if necessary).	(Be specific)
/A	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
'A	

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