## P23000044668

Office Use Only



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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Professional Packe	rs Inc				
DOCUMENT NUME						
	of Amendment and fee are su	bmitted for filing.				
Please return all corres	spondence concerning this ma	tter to the following:				
	Registered Agents Inc					
	Name of Contact Person					
	Registered Agents Inc					
		Firm/ Company				
	7901 4th St N, STE 300St.					
	Address					
	Petersburg , FL 33702					
	City/ State and Zip Code					
	cfo@professionalpackersinc.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information Kimberly Thomas	n concerning this matter, pleas	904	373-4742			
Name o	of Contact Person	at (	_) le & Daytime Telephone Number			
	r the following amount made		,			
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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

## Articles of Amendment to Articles of Incorporation of

PROFESSIONAL PACKERS INC.

(Name of Corpo	ration as currently fi	ed with the Florid	a Dept. of State)	
23000044668				
(Do	ocument Number of Co	rporation (if knowr	)	
ursuant to the provisions of section 607,1006, Flos Articles of Incorporation:	orida Statutes, this Floa	rida Profit Corpora	tion adopts the follo	wing amendment(s
. If amending name, enter the new name of the	he corporation:			
				The new
ame must be distinguishable and contain the word Inc.," or Co.," or the designation "Corp," " chartered," "professional association," or the a	Inc," or "Co". A pr	pany," or "incorpoi ofessional corpora	rated" or the abbrevi tion name must cor	ation "Corp.," itain the word
. Enter new principal office address, if applic	able:			
Principal office address <u>MUST BE A STREET</u> .	ADDRESS )			
	_	<u> </u>		<del></del>
	-			<del></del> _
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>: BOX</u> )			
If any division the second sec	-			23
<ol> <li>If amending the registered agent and/or reg new registered agent and/or the new registe</li> </ol>		in Florida, enter t	he name of the	
Name of New Registered Agent				52.
	•			
	(Florida street d	ddress)		
			, Florida	<b>.</b> .
New Registered Office Address:		v) + 1	, i iorida	<u> </u>

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 Doc	
X Remove	<u>V</u> <u>i</u>	Mike Jones	
X Add	<u>sv</u> s	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	CEO	Kimberly Thomas	13475 Atlantic Blvd. Unit 8 #3031
Add			Jacksonville, FL 32225
Remove			
2) X Change	COO	Gary Givens	13475 Atlantic Blvd. Unit 8 #3031
Add			Jacksonville, FL 32225
Remove 3 ) X Change	CFO	Osborne Collins	13475 Atlantic Blvd. Unit 8 #3031
Add			Jacksonville, FL 32225
Remove			
4) Change	<u>COO</u>	Lorraine Collins	13475 Atlantic Blvd. Unit 8 #3031
Add			Jacksonville, FL 32225
X Remove			
5) Change			<del></del>
Add			
Remove			<del></del>
6) Change			
Add			
Remove			

(Att	mending or adding additional Articles, enter change(s) here: ach additional sheets. if necessary). (Be specific)
. <u>lf a</u>	n amendment provides for an exchange, reclassification, or cancellation of issued shares,
<u>pr</u>	ovisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)

. . . .

The date of each amendment(s	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirement Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the ame sufficient for approval.	endment(s)
The state of the s	approved by the shareholders through voting groups. The followin for each voting group entitled to vote separately on the amendmen	•••
"The number of votes es	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
6/14/202 Dated	3	
selec	director, president of other officer – if directors or officers have a cited, by an incorporator – if in the hands of a receiver, trustee, or cointed fiduciary by that fiduciary)	
	Kimberly Thomas	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	