## 07250000006576

(Requ	uestor's Name)	
(Adda	ess)	
(Adda	ess)	
(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	ne)
(Docu	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	





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12/22/25--01009--033 ++35.00

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: C&B Outdoor Solu	utions	
DOCUMENT NUM	P23000062576		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	respondence concerning this ma	itter to the following:	
	Cynthia Schneider		
		Name of Contact Person	1
	C&B Outdoor Solutions		
		Firm/ Company	
	45 Greyes Place		
		Address	
	Crawfordville, FI 32327		
		City/ State and Zip Code	e
	Cynthia.Schneider84@gmail	.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	on concerning this matter, pleas	se call:	
Cynthia Schneider		at (	
Name	e 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	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ai Di P.o	neiling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section on of Corporations entre of Tallahassee V. Monroe Street, Suite 810 ussee, FL 32303

## Articles of Amendment to Articles of Incorporation of

C&B Outdoor Solutions	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P23000062576	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "co" "Inc.," or Co" or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent 30 Shum Bryan	J MacManus =
(Florida stree	et address)
New Registered Office Address:	, Florida
· · · · · · · · · · · · · · · · · · ·	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with the second s	

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:

Remove

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 F 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  Mike Jones			
X Remove	$\underline{\mathbf{V}}$				
X Add	<u>SV</u>	Sally Sm	<u>iith</u>		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address	
1) Change	P		Cynthia H. Schneider	45 Greyes Place	_
Add				Crawfordville, Fl	
X Remove				32327	_
Change	P		Joshua B. MacManus	45 Greyes Place	-
X Add		<del></del>		Crawfordville, Fl	_
Remove 3 ) Change				32327	
Add					
Remove					· ·
4) Change		_			- :-: - :-:
Add					
Remove					_
5)Change					_
Add					_
Remove					-
6) Change		_			_
Ađd					_

f amending or adding additional Articles, enter change(s) here:  Attach additional sheets, if necessary). (Be specific)	
	<del></del>
	<del></del>
	-
	-
f an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
	<del>-</del> · · · ·

11/15/2023
The date of each amendment(s) adoption:, if other than the
date this document was signed.
08/26/2023 Effective date if applicable:
(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 not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
■ 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 east for the amendment(s) was/were sufficient for approval
by
(voting group)
Dated
elected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
-Cynthia II. Schneider Soshua Bryan MacManus
(Typed or printed name of person signing)
President
(Title of person signing)