Florida Department of State

H24000 410519

Division of Corporations
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14 DEC 13 AM 9:

COR AMND/RESTATE/CORRECT OR O/D RESIGN SOUTHERN DEVELOPMENT GROUP, INC.

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J DEROIS

COVER LETTER

TO: Amendment Sect Division of Corpo			
NAME OF CORPOR	RATION: Southern Develop	ment Group, Inc.	·
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this me	atter to the following:	
	ANNETTE MOTA		
		Name of Contact Perso	n
	API PROCESSING - LICEN	ISING INC	
		Firm/ Company	- · · · · · · · · · · · · · · · · · · ·
	3419 GALT OCEAN DRIVE SUITE A		
		Address	
	FORT LAUDERDALE FL 3	3308	
•		City/ State and Zip Cod	c
	ANNETTE@APIPROCESS	ING.COM	
•	E-mail address: (to be us	sed for future annual report	notification)
For further Information	concerning this matter, please	se call:	
ANNETTE MOTA		at / ⁹⁵⁴	567-0013 X 12
ANNETTE MOTA at (354) 567-0013 X 12 Name of Contact Person Area Code & Daytime Telephone Nu		de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	ariment of State:
S35 Filing Fee	□\$43.75 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)
Ame: Divis P.O.	ing Address indiment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 assee, FL 32303

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Articles of Amendment to Articles of Incorporation of

SOUTHERN DEVELOPMENT GROUP, I	NC.			
(Name of C	Corporation as currently	filed with the Florida D	ept. of State)	
P24000007168				
	(Document Number of (Corporation (if known)		
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06, Plorida Statutes, this Fi	lori da P rofit Corporation	n adopts the following	ng amendment(
A. If amending name, enter the new name	e of the corporation:			
			*** .* .*	_The new
name must be distinguishable and contain the "Inc.," or Co.," or the designation "Corp "chartered," "professional association," or	o," "Inc," or "Co". A	mpany," or "incorporate professional corporatior	id" or the abbreviation name must contai	on "Corp.," In the word
B. Enter new principal office address, if a				
(Principal office address MUST BE A STR)	EET ADDRESS)			_
				
C. Enter now mailing address, it applicab	ole:			
(Mailing address MAY BE A POST OF)				
		/		
D. If amending the registered agent and/o	r registered office addres	ss in Florida, enter the r	name of the	
new registered agent and/or the new re	gistered office address:			
Name of New Registered Agent				_
_	(Florida street	(address)	·	-
New Registered Office Address:			Florida	
New Registered Office Address,	(C	102	, Florida(Zip (Code)
	/			
New Registered Agent's Signature, if chan-				•
hereby accept the appointment as registered	i agent, / i am jamiliar wil	h and accept the obligati	ons of the position	E 2024 DEC
			至高	í B
	Signature of New Reg	istered Agent, if changing	8	13
Check if applicable			<u> </u>	3
I The amendment(s) is/are being filed pursu	ant to s. 607.0120 (11) (e)	, F.S.	55	
•	· / (-/		の か 毎担	8: 45
			*1 CH	Ċ

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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	PI	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mika Jones	
X Add	<u>sv</u>	Saily Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
i) Change	V	MICHAEL GRIFFIN	826 SOUTH 9TH STREET
Add			LANTANA PL 33462
X Remove			
2) Change			
Add			
Remove 3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove	•		
6) Change			
Add			· · · · · ·
Remove		•	

f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
	.
	
	
	
	
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)	
•	
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market and the second s	
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The date of each amendmen date this document was signed		, if other than the
Effective date if applicable:	12/11/2024	
Enterior date in applicable.	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date the Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholder action	a and shareholder
	re adopted by the shareholders. The number of votes east for the amendment(s) cre sufficient for approval.	ŀ
	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):	าใ
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
BELSERI L CO	MERFROD "	
0,	(voting group)	
	2 13, 2024	
Signature Be	Belseri Comerford Sect Comerford (Dec 13, 2024 08:17 EST)	
(B	by a director, president or other officer - if directors or officers have not been elected, by an incorporator - if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)	
	BELSERI L COMBRFORD	
	(Typed or printed name of person signing)	
	P	
	(Title of person signing)	