## P24000037571

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JAN 17 S. PRATHER

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SELLECK HILL I	LAND CORPORATION	
DOCUMENT NUM	BER: P24000037571		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	itter to the following:	
	ROBERT A. D'ANGIO, JR.		
		Name of Contact Person	1
	ROBERT A. D'ANGIO, JR.,	, P.A.	
		Firm/ Company	
	8720 WELLINGTON VIEW	DRIVE	
		Address	
	WEST PALM BEACH, FLO	ORIDA 33411-5308	
		City/ State and Zip Cod-	e
	INLAWFL@AOL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatic	on concerning this matter, pleas	se call: at (	346-9821
Name of Contact Person		at (Area Co	de & Daytime Telephone Number
Enclosed is a check fo	or the following amount made		•
S35 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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee 3. Monroe Street, Suite 810 ssee, FL 32303

## Articles of Amendment to

Articles of free of	or por acros
SELLECK HILL LAND CORPORATION	
(Name of Corporation as currentl	y filed with the Florida Dept. of State)
P24000037571	<u>.</u>
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "c" "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". c"chartered," "professional association," or the abbreviation "P.A."	I professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. BOX 646
	EAKEVILLE, CT 06039
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida str	vet address)
New Registered Office Address:	(City) (Liz Code)
	(City) (219 Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	i 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)

Example:

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 = ChiefExecutive 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>Ld</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) X Change	P	ANA CHRYSLER	15 WOODS DRIVE
Add			HARBOR SPRINGS, MI 49740
Remove			
2) Change	S	JEN WHITTIER	321 E NILA WAY
Add			SALT LAKE CITY, UT 84124
X Remove	\$	HILARY JOHNSON	
X Add			66 MUNRO PLACE
Remove			WINSTED, CT 06098
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			·
Add			
Remove			

f amending or adding additional Arti Attach <i>odditional sheets, if necessary).</i>	(Be specific)
•	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the open	
(if not applicable, indicate N/A)	TO THE REPORT OF THE PARTY OF T
(if not applicable, indicate N/A)	THE THE PARTY OF T
if not applicable, indicate N/A)	

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date this document was signed.	toption:	, if other than t
DEC	EMBER 1, 2024	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file d	aus)
	mo more man 10 days ager umenamen yae a	are)
Note: If the date inserted in this be document's effective date on the Do	lock does not meet the applicable statutory filing requiren partment of State's records.	nents, this date will not be listed as t
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ade action was not required.	pted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were se	pted by the shareholders. The number of votes cast for the flicient for approval.	amendment(s)
	roved by the shareholders through voting groups. The followard to voting group entitled to vote separately on the amend	
"The number of votes east	for the amendment(s) was/were sufficient for approval	•
by	r	
	(voting group)	
DUCTAON	D 4 2024	
DECEMBI Dated	.K 4, 2024	
Signature		
(By a di selected	rector, president or other officer – if directors or officers ha l, by an incorporator – if in the hands of a receiver, trustee, ed fiduciary by that fiduciary)	
	THOMAS VAII.	
	(Typed or printed name of person signing)	_
	TREASURER	
	(Title of person signing)	