## P93000011330

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: SPD GROUP,INC		
DOCUMENT NUMI	P03000011330		<del> </del>
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Kathleen A. Kadyzewski		
		Name of Contact Person	n
	Murphy Reid, LLP		
		Firm/ Company	
	11300 U. S. Highway One, S	uite 401	
		Address	
	Palm Beach Gardens, FL 33-	108	
		City/ State and Zip Cod	e
	tony@odcpa.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information Kathleen A. Kadyzew	n concerning this matter, pleas	se call:at (at	355-8800
Name o	of Contact Person	Area Co	/ de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 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)
Ame Divi P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

2021 NOV -8 PM 3:54

SPD GROUP INC.	P. T. O. D. T.
(Name of Corporatio	on as currently filed with the Florida Dept. of State)
P93000011330	···
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	erporation:
	The new
	prporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word viation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOY</u>	<u> </u>
D. If amending the registered agent and/or registere	red office address in Florida, enter the name of the
new registered agent and/or the new registered o	
Name of New Registered Agent	
	(Florida street 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 <mark>stered Agent:</mark> I am familiar with and accept the obligations of the position.
Signat	ture 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)

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.

Example: X_Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>P</u>	James R. Dunn	4210 N Federal Hwy
Add			Lighthouse Point, FL 33064
X Remove			
2) X Change	P	Ann Marie Dunn	4210 N Federal Hwy
Add			Lighthouse Point, FL 33064
Remove 3) Change		<u> </u>	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change		_	****
Add			
Remove			

n amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	tach <i>additional she</i>	ng additional Articles, ent pets, if necessary).— (Be spe	ecific)			
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(if not applicable, indicate N/A)	ovisions for imple	menting the amendment i	f not contained	in the amendmen	t itself:	
	(if not applicable	z, indicate N/A)				
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The date of each amendment(s	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this de Department of State's records.	ite 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 shareholder acti	on and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(e sufficient for approval.	(s)
	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other councinted fiduciary by that fiduciary)	<del></del> rt
	Ann Marie Dunn	
	(Typed or printed name of person signing)	
	President/Director	
	(Title of person signing)	

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