# P93000014504

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### FLORIDA FILING & SEARCH SERVICES, INC.

## P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 11-07-19

**NAME:** FLORIDA FILING & SEARCH SERVICES, INC.

TYPE OF FILING: AMENDMENT

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**AUTHORIZATION: ABBIE/PAUL HODGE** 

#### **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	ON:FLORIDA FILM	MG & SEARCH SERVICE	S. INC.		
DOCUMENT NUMBER:	P93000016804				
The enclosed Articles of Art	nendment and fee are su	bmitted for filing.			
Please return all correspond	ence concerning this ma	tter to the following:			
		Name of Contact Person	1		
	Firm/ Company				
	Address				
		City/ State and Zip Code	ρ.		
	í	abbie@floridatiling.com	•		
·	E-mail address: (to be us	sed for future annual report	notification)		
For further information con	cerning this matter, pleas	se call:			
		at ( <u>***</u>	216-0457		
Name of Co	ntact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for 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)		
Mailing Address  Amendment Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Tallahassee, FL 32314

# Articles of Amendment to Articles of Incorporation

of

#### FLORIDA FILING & SEARCH SERVICES, INC.

(Name of Corporation	as currenti	y filed with the Florida Dept. of	State)
	P9300001680	)4	
(Docume	nt Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida 5 its Articles of Incorporation:	Statutes, this	Florida Profit Corporation adop	ts the following amendment(s)
A. If amending name, enter the new name of the corp	poration:		
			The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the a	"nnc," or "	Co". A professional corporatio	ed" or the abbreviation n name must contain the
B. Enter new principal office address, if applicable:			<u> </u>
(Principal office address MUST BE A STREET ADDR	RESS )		
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	9		
			Ç.
			<u> </u>
D. If amending the registered agent and/or registere new registered agent and/or the new registered o			of the
Name of New Registered Agent			
<u> </u>			
	(Florida str	vet address)	
New Registered Office Address:		F	lorida
	•	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis	stered Agent	<u>i</u>	
I hereby accept the appointment as registered agent. 1	am familiar i	with and accept the obligations o	the position.
	and Marie I	Vaietarad Auent if changing	<del></del>

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: $\underline{X}$ Change	<u>PT</u>	John Do	<u>e</u>			
X Remove	$\underline{\mathbf{V}}$	Mike Jos	Mike Jones			
X Add	<u>SV</u>	Sally Sm	Sally Smith			
Type of Action (Check One)	<u>Title</u>		Name	Address		
1) X Change	CFO		ABBIE P. HODGE	P.O. BOX 10662		
Add				TALLAHASSEE, FL 32302		
Remove						
2) Change	COO		LEISA D. PICHARD	P.O. BOX 10662		
X Add				TALLAHASSEE, FL 32302		
Remove						
3 ) Change		_				
Add				<del></del>		
Remove						
4) Change						
Add						
Remove						
5) Change		_	<u> </u>			
Add						
Remove						
6) Change		_				
Add						
Remove				<u></u>		

	ing additional Art eets, if necessary).	(Be specific)				
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an amendment p		<u>enament ii not co</u>	mained in the an	iendinene usen.		
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provisions for imp	ble, indicate N/A)					

	SEPTEMBER 9, 2019	
The date of each amendment(s) ad	option:	, if other than the
late 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 this blocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
☐ The amendment(s) was/were appromust be separately provided for e	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopaction was not required.	oted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopaction was not required.	pted by the incorporators without shareholder action and shareholder	
NOVE Dated	MBER 7, 2019	
Signature	PU Hod	
(By a di selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	_
	PAUL D. HODGE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del></del>