# P9400022522

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(Re	questor's Name)		
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PICK-UP	WAIT		
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Certified Copies	Certificates	of Status	
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#### COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: \_\_\_\_\_\_

DOCUMENT NUMBER: \_\_\_\_\_

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael D. Gentzle, Esq.

Name of Contact Person

Coleman, Yovanovich & Koester, P.A.

Firm/ Company

4001 Tamiami Trail North, Suite 300

Address

Naples, FL 34103

City/ State and Zip Code

charris@superiorsheds.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 Michael D. Gentzle, Esq.
 at (239)
 435-3535

 Name of Contact Person
 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 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 <u>Street Address</u> Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

Superior Sheds, Inc.

## (Name of Corporation as currently filed with the Florida Dept. of State)

P94000022522

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

## A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

#### B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)

					_
C.		icable:	<u></u>	6102	
	(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)		- 1	· · ·
				<u>,</u> ,,	
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15	If among dia a sh			7:	
D.	it amending the registered agent ar	d/or registered office address in Florida, enter the name	<u>: of the</u>	- <del></del>	$\sim$
	new registered agent and/or the new	w registered office address:		ال	
	Name of New Registered Agent	Christy R. Harris	•	<u>ن</u> ـــَ	
		2323 South Volusia Avenue		-	
		(Florida street address)		_	
	New Registered Office Address:	Orange City	Florida 32763		
	•	(City)	(Zip	Code)	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as regifiered ogent of emfamiliar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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Page 1 of 4

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:

 $P \in President; V = Vice President; T = Treasurer; S = Secretary, D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held President, Treasurer, Director would be PTD.$ 

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.

Evam	ple:
Nº 6 12	

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<u>X</u> Change	<u>PT</u>	John Doe	
<u>X</u> Remove	$\underline{N}$	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1)Change	PD	Alex Martens	2323 South Volusia Avenue
Add			Orange City, FL 32763
XRemove			
2) Change			
Add			
Remove			
3) Change			
Add			•
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

# E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary) (Be specific)

F. If 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)

\_\_\_\_

\_\_\_\_\_

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 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 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 cast for the amendmem(s) was/were sufficient for approval

hv

(voting group)

- □ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- □ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

April Dated Signature

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

David N. Sexton

(Typed or printed name of person signing)

Vice President

(Title of person signing)