P960000 1604

(R	equestor's Name)
(A	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
	WAIT MAIL
(В	usiness Entity Name)
(D	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:
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SEP 2 3 2021

S. PRATHER

COVER LETTER

TO: Amendment Section 7 Division of Corporations

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Pelican Real Estate and Development Company, Inc.

NAME OF CORPORATION:	
129600001604	
DOCUMENT NUMBER:	

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

Please return all correspondence concerning this matter to the following:

Stephen Syfrett, Esq.

 Name of Contact Person

 Syfrett Law, PLLC

 Firm/ Company

 502 Harmon Avenue

 Address

 Panama City , FL 32405

 City/ State and Zip Code

 Stephen@ wsgtirm.com

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

For further information concerning this matter, please call:

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

Stephen Syfrett	850	692-9612
	at (_)
Name of Contact Person	Area Coo	le & Daytime Telephone Number

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

S35 Filing Fee

S43.75 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) 1

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendme	nt	
to Articles of Incorporati of		
Pelican Real Estate and Development Company, Inc.		
(Name of Corporation as currently filed wi 196(0000)16()41		
(Document Number of Corpora	tion (if known)	<u>≭ -</u>
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida F</i> its Articles of Incorporation:		dinent(s)
A. If amending name, enter the new name of the corporation:		
N/A	The	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>) C. <u>Enter new mailing address, if applicable:</u>		-
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
D. If amending the registered agent and/or registered office address in Fl new registered agent and/or the new registered office address:	orida, enter the name of the	
Name of New Registered Agent		
tFlorida street addres.	NJ	
<u>New Registered Office Address:</u> (City)	, Florida Zip Code)	_
New Registered Agent's Signature, if changing Registered Agent:		

Signature of New Registered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c). 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: <u>PT</u> John Doe X Change X Remove <u>V</u> Mike Jones <u>X</u> Add <u>sv</u> Sally Smith Type of Action Title Name Address (Check One) William Smith Ð 1) ____ Change _ Add X ____ Remove 2) ____ Change ____ Add ___ Remove 3) ____ Change ____ Add ___ Remove 4) ____ Change ____ Add Remove 51 ____ Change _____ Add ____ Remove 6) ____ Change ___ Add Remove

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F.	If amending	or adding	additional	Articles.	enter	change(s) here:

(Attach additional sheets, if necessary). (Be specific) N/A

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. <u>If an amendme</u>	nt provides for an	<u>i exchange, reclassi</u>	fication, or cancell	ation of issued shal	res,	
provisions for	implementing the dicable, indicate N/	<u>, amendment it not</u> /iv	contained in the a	nenament itseif:		
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· · · ·	
The date of each amendment(s) adopt date this document was signed.	otion:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this bloc document's effective date on the Depa	k does not meet the applicable statutory filing requirements, this date will not be listed as the rtment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were adopt	ed by the incorporators, or board of directors without shareholder action and shareholder

- action was not required. \Box The number of votes cast for the amendment(s)
- □ 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):

<u>. </u>	(voting group)	AHASS	2021 SEP 1
Dated (19)	/07/2021	Y OF 31 EE. FL(O AH
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	FLORIDA	7:13
	appointed fiduciary by that fiduciary) Julie Lawson		

President

(Title of person signing)