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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: <u>Lizabet Realty</u>, Inc. The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Elizabeth Anne Lane
Name of Contact Person Firm/ Company Mlami, FL 33/43
City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (<u>828</u>) <u>143-5155</u> Area Code & Daytime Telephone Number Elizabeth A. Lane Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

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Lizabet Realty In	4		
(Name of Corporation as current)	y filed with the Florida Dept. of State		
P 97000094	FCorporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	•	following a	amendment(s) t
A. If amending name, enter the new name of the corporation:			
		7	The new
name must be distinguishable and contain the word "corporation," "Co"" or Co" or the designation "Corp." "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the ab professional corporation name mus	breviation	"Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		<u> </u>	<u>_</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address	ess in Florida, enter the name of the	ALLAHASSEE FLORIDA	FILED 2022 JUL 11 AH 11:07
new registered agent and/or the new registered office address	<u>:</u>		
Name of New Registered Agent			
(Florida str	eet address)		
New Registered Office Address:	, Florida_		
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar s	(City) Evith and accept the obligations of the p	(Zip Co osition.	de)
Signature of New R	egistered Agent, if changing		
Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11)			

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.

X Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Catherine J. Gray	BGO Mapleton Terroce Incksonville, FL 32201
_ _X _ Add			Incksonville, FL 32207
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			1922 JU
Add			ABS:
Remove			m
5) Change			AA D
Add			
Remove			
6) Change	-		
Add			
Parawa			

Attach additional sheets, if necessary).	icles, enter change(s (Be specific)					
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	hange, reclassification	on, or cancellation	of issued shares,			
f an amendment provides for an excl		iinea in the ament	mient usen.			
provisions for implementing the amo	endment if not conta					
f an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	endment it not conta					
provisions for implementing the amo	endment II not conta			_		
provisions for implementing the amo	endment il not conta		<u>, </u>	_		
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The,date of each amendment(s) adoption:	, if other than the
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 document's effective date on the Department of State's records.	e will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	n and shareholder
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):	F-1
[
by" (voting group)	AL: 0
Signature Eljabeth One Lane (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)	
Elizabeth Anne Lane (Typed or printed name of person signing)	
President (File of person signing)	-