P980000 11715

(Re	questor's Name)		
(Ad	dress)		
(Ad	idress)		
(Cit	ry/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	ne)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



200344567472

05/13/20--01025--023 **35.98



Amend

JUH ± 0 ZUZU

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: McLeod Land & Equipment Inc.				
DOCUMENT NUMBER: P98000011775				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Skip Aersol Name of Contact Person McLead Land + Equipment, Inc. Firm/ Company				
7405 28th Street Court East				
Savasota Fl 34243 Cityl State and Zip Code				
City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Skip Revision at (941) 374-0889 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 Certificate of Status Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Milling Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

Articles of Amendment

to

Articles of Incorporation

 \mathbf{of}

	juipment, Inc.	
	filed with the Florida Dept. of State)	
P980000	[] T + 5 [Corporation (if known)	
	·	
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>I</i> its Articles of Incorporation:	***Torida Profit Corporation adopts the follows:	ng amendment(s) to
A. If amending name, enter the new name of the corporation:		
N/A		The _new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviate professional corporation name must conta	ion "Corp.," iin the word
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	·	
	<u> </u>	1029
G. F. A. W. H. Markett	,	3
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/R	
	,	E Mi
		8: 05
		
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:		O.
A A /-		
Name of New Registered Agent N/N		
		_
rrioriaa stre	et adaress)	
New Registered Office Address:	Civy , Florida (Zio	Code)
·	(24)	(ode)
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent. I am familiar w	and accept the obligations of the position.	
/		
N/A	egistered Agent, if changing	_
Signature of New Re	gistered 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> Jo	<u>shn Doe</u>	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	DRE	Tamony McLeod	
Add			Sarasota, FL 34243
Remove			
2) Change		<u></u>	
Add		٠	
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ing or adding additional Articles, enter change(s) here: lditional sheets, if necessary). (Be specific)
	N/A
•	
	,
	··-
r2 10	
r. Han ame	endment provides for an exchange, reclassification, or cancellation of issued shares, ns for implementing the amendment if not contained in the amendment itself:
(if n	ot applicable, indicate N/A)
·	N/A
	<u> 10 / R</u>
	-

.

The date of each amendment(s) adoption: _	N/A	, if other than the
date this document was signed.	E / 1 / -	
Effective date <u>if applicable</u> :	5/1+/2020 (no more than 90 days after amendment)	Pl. Leave
	tho more than 90 days after amenament	file date)
Note: If the date inserted in this block does document's effective date on the Department of		uirements, this date will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)	
☐ The amendment(s) was/were adopted by the action was not required.	e incorporators, or board of directors withou	it shareholder action and shareholder
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		or the amendment(s)
☐ The amendment(s) was/were approved by t must be separately provided for each votin	he shareholders through voting groups. The ag group entitled to vote separately on the a	
	endment(s) was/were sufficient for approva	1
by	oting group)	
(ve	oting group)	
Dated 5-18	2020	
Dated 5-18 Signature	1	
(By a director, pre selected, by an ind	rsident or other officer – if directors or office corporator – if in the hands of a receiver, tru ry by that fiduciary)	
	TAMES McLeoD (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	(Title of person signing)	
	(Title of person signing)	