P99000003069

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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04 APR 21 AM 11:35
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

X00789, 00610, 00672

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

April 21, 2004

Capital Connection, Inc.
417 E. Virginia St.
Suite 1
Tallahassee, FL 32301

SUBJECT: 815 NORTH MASSACHUSETTS, INC.
Ref. Number: P99000003069

We have received your document for 815 NORTH MASSACHUSETTS, INC. and your check(s) totaling $43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey
Document Specialist

Letter Number: 704A00026509

RE-SUBMIT
PLEASE OBTAIN THE ORIGINAL
FILE DATE

RECEIVED
04 APR 26 AM 9:34
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.
417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

815 North Massachusetts

Signature

Requested by: RW 4/21 _____
Name Date Time

Walk-In _____ Will Pick Up _____

_____ Art of Inc. File_____
_____ LTD Partnership File_____
_____ Foreign Corp. File_____
_____ L.C. File_____
_____ Fictitious Name File_____
_____ Trade/Service Mark_____
_____ Merger File_____
✓ Art. of Amend. File_____
_____ RA Resignation_____
_____ Dissolution / Withdrawal_____
_____ Annual Report / Reinstatement_____
✓ Cert. Copy_____
_____ Photo Copy_____
_____ Certificate of Good Standing_____
_____ Certificate of Status_____
_____ Certificate of Fictitious Name_____
_____ Corp Record Search_____
_____ Officer Search_____
_____ Fictitious Search_____
_____ Fictitious Owner Search_____
_____ Vehicle Search_____
_____ Driving Record_____
_____ UCC 1 or 3 File_____
_____ UCC 11 Search_____
_____ UCC 11 Retrieval_____
_____ Courier_____

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 815 North Massachusetts, Inc.

DOCUMENT NUMBER: P99000003069

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

Please return all correspondence concerning this matter to the following:

Peter A. McFarlane
(Name of Person)

PETER A. McFARLANE, P.A.
(Name of Firm/ Company)

500 South Florida Avenue, Suite 715
(Address)

Lakeland, Florida 33801
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Peter A. McFarlane at (863) 647-1581
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ $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
409 E. Gaines Street
Tallahassee, FL 32399

FILED
04 APR 26 PM 1:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

815 North Massachusetts, Inc.
(Name of corporation as currently filed with the Florida Dept. of State)

P99000003069
(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:

NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

1. William W. Read, Jr. resigns as Director and Officer.
2. Bob Stanley is elected President/Treasurer/Director
   1000 West Beacon Road, Lakeland, FL 33803
3. Hugh Turbeville is elected Vice President/Secretary/Director
   P. O. Box 434, Lakeland, FL 33802
4. Abel Putnam is replaced as Registered Agent by Hugh Turbeville
   1000 West Beacon Road
   Lakeland, FL 33803.

(Attach additional pages if necessary)

If an amendment provides for 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)

(continued)

The date of each amendment(s) adoption: _____

Effective date if applicable: March 1, 2004
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

☒ The amendment(s) was/were approved 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 amendment(s) was/were sufficient for approval by _____."
(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.

Signed this 20th day of April, 2004.

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)

Hugh Turbeville
(Typed or printed name of person signing)

Vice President/Secretary/Director
(Title of person signing)

I am aware of and familiar with the duties of a Registered Agent and do hereby accept responsibility of Registered Agent.

_____
Hugh Turbeville

FILING FEE: $35