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COVER LETTER

TO: Amendment Section

Division of Corporations

SPACE COAST ('QUSHEES INC. 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: Lloyd F. Glove (
Name of Contact Person SPACE COAST COUSITEES

Firm/Company

Address

Address Rockledge, F1. 32955
City/ State and Zip Code SCCrushers & hellsouth. net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Lloyd Flolover at (407) 832-3184 Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □S43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy 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 32314

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

Social Canal Cinates of the	. •
Name of Corporation as current	ly filed with the Florida Dept. of State)
19900021502	Y med with the 1 toring Dept. or State,
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "a "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	9 m
	
 If amending the registered agent and/or registered office add new registered agent and/or the new registered office address 	
Name of New Registered Agent	<u> </u>
(Florida str	reet address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New R	Registered 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)

Add

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 PT John Doe X Remove V Mike Jones \underline{X} Add \underline{SV} Sally Smith Type of Action Title <u>Addres</u>s (Check One) MICHAEL A GLOVER 1355 FRIDAY RO. 1) Change X_{Add} Remove KENNETH PHODENCY, 2) ____ Change X_ Add ___ Remove 3) Change ____ Add Remove 4) ____ Change ___ Add __ Remove 5) ____ Change ___ Add ____ Remove 6) ____ Change

Attach ac	ing or adding additional sheets, if	necessary). (E	Be specific)			
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		,			<u></u>	
						·
					 	
If an one		. fa avak	us -selsavi6sut	ion on oppositoti	on of issued share	
provisio	ns for implemen	ting the amendr	nent if not cont	tained in the ame	ndment itself:	: <u>3,</u>
(if n	ot applicable, ind	icate N/A)				
						
					· · ·	
					 -	
			<u> </u>			

The date of each amendment(s) adoption: DEC, 29, 2012 date this document was signed.	, if other than the
Effective date <u>if applicable</u> :	
(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 document's effective date on the Department of State's records.	ll not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	d shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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 16221	
(voting group)	
Dated April 6, 2021	
Signature 14	
(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)	_
LloyaF6love((Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	