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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Tower Publications, Inc. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Carlos Delatorre Name of Contact Person Tower Publications, Inc. Firm/ Company 4400 NW 36th Ave Address Gainesville, Florida 32606 City/ State and Zip Code charlie@towerpublications.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (\frac{352}{\text{Area Code & Daytime Telephone Number}} Carlos Delatorre 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 Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tałłahassee, FL 32314 Street Address

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

is enclosed)

Articles of Amendment to Articles of Incorporation of

Tower Publications, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) (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: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New 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)

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	PT John D	<u>oe</u>	
X Remove	<u>V</u> <u>Mike Jo</u>	<u>ones</u>	
X Add	<u>SV</u> <u>Sally S</u>	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VSTD	Bonita Delatorre	4400 NW 36th Ave
Add			Gainesville, Fl. 32606
X Remove			
2) X Change	PVSTD	Carlos Delatorre	4400 NW 36th Ave
Add			Gainesville, FL 32606
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ding additional Artisheets, if necessary).	(Be specific)			
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provisions for im	provides for an exclude plementing the ame	nange, reclassificat	tained in the ame	on of issued snares, ndment itself:	
(if not applice	able, indicate N/A)				

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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.	will 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 action was not required.	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):	,
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
Dated 12/9/20	
7-	
Signature	
selected, by an incorporator of in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
CARLOS Delatorce	
(Typed or printed name of person signing)	
Kresidut	
(Title of person signing)	—