595680

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: 301 Supply Inc				
DOCUMENT NUM					
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Glen C Abbott				
		Name of Contact Persor	1		
	Glen C Abbott Attorney				
		Firm/ Company			
	9030 W Fort Island Trail Suite 11B				
	Address				
	Crystal River, FL 34429				
		City/ State and Zip Code			
	ray@epaconsultants.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
Glen C Abbott Attori	ney	at (<u>352</u>	795-5699 de & Daytime Telephone Number		
Name	of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 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		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

301 Supply, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) S95680 (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: NA The new 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." NA B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: NA (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: LINDA P. STEPHENS Name of New Registered Agent 8715 SW 190th Ave. Rd., Dunnellon, FL 34432 (Florida street address) New Registered Office Address: . Florida (Zip Code) 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.

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)

Example:

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 Doe		
X Remove	$\underline{\mathbf{V}}$	Mike Jo	ones	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change	MGR	_	STANLEY E. STEPHENS	
Add				
Remove 2) Change	PST	_	LINDA P. STEPHENS	8715 SW 190th Ave Rd
X Add				Dunnellon, FL 34432
Remove 3) Change		_		
Add				
Remove 4) Change		_		
Add				
Remove				
5) Change Add		_		
Remove				
6) Change				
Add				.,
Remove				

	mending or adding additional Articles, enter change(s) here: ach additional sheets, if necessary). (Be specific)
	-
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H a)	n amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
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The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		<u>,</u>
	(no more than 90 days after amendment file dat	e)
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirement Department of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the ar sufficient for approval.	mendment(s)
	approved by the shareholders through voting groups. The follow for each voting group entitled to vote separately on the amendment	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selec	director, president or other officers if directors or officers have ted, by an incorporator – if in the hands of a receiver, trustee, or inted fiduciary by that fiduciary)	
	LINDA P. STEPHENS	
	(Typed or printed name of person signing)	
	TRUSTEE	
	(Title of person signing)	