## V26157

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

1 - 3

NAME OF CO	RPORATION: BOB JACKSON,	INC.			
DOCUMENT S	V26157				
The enclosed Ar	ticles of Amendment and fee are se	ibmitted for filing.			
Please return all	correspondence concerning this ma	atter to the following:			
	Jackson, Robert E. HI				
	Bob Jackson, Inc.	Name of Contact Persor	1		
	-	Firm/ Company			
	205 Worth Ave. Suite 307 E				
	Address Palm Beach, FL 33480				
		City/ State and Zip Cod	<u> </u>		
	robbiejaxn@gmail.com				
	E-mail address; (to be u	sed for future annual report	notification)		
For further infor	mation concerning this matter, plea	ise call:			
Rober E Jackson	n III	561	801-0776		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a ch	eck for the following amount made	payable to the Florida Dep	artment of State:		
■ \$35 Filling F	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, F1, 32314		Ameno Divisio The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, F1, 32303		

## **Articles of Amendment** to Articles of Incorporation

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

	Articles of Ir	•	, Mr
BOB JACKSON, INC.	O	1	
(Name	of Corporation as curren	tly filed with the Flor	ida Deptsőfskálej 5 - 7 · ·
V26157		·	13 fal S: 48
	(Document Number	of Corporation (if kno-	wn)
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Statutes, this	s Florida Profit Corpo	pration adopts the following amendment(s)
A. If amending name, enter the new r	name of the corporation:		
N/A	_		The new
name must be distinguishable and contai "Inc.," or Co.," or the designation " "chartered," "professional association.	Corp." "Inc." or "Co"	A professional corpo	porated" or the abbreviation "Corp.,"
B. Enter new principal office address.	if applicable:	N/A	
(Principal office address MUST BE A.		_	
		<del></del>	
C. Enter new mailing address, if app	licable:	NUA	
(Mailing address MAY BE A POST	OFFICE BOX)	N/A 	
<li>If amending the registered agent a new registered agent and/or the ne</li>	nd/or registered office add	<u>dress in Florida, enter</u>	r the name of the
new registered agent and/or the ne	Jackson, Robert E. III	<u>ss.</u>	
Name of New Registered Agent			
	P.O. Box 2201		
		treet address)	
New Registered Office Address:	Palm Beach		, Florida
		(Cuv)	(Zip Code)
New Registered Agent's Signature, if o	rhanging Registered Agen	ıt:	
I hereby accept the appointment as regis	tered agent – Lam familiar	with and accept the ol	bligations of the position.
	1	/ /	
,	May 8		1/1/
	Signature of Selver	Registered Agent, if ch	ancine
		a ganeren agem. Hen	on the contract of the contrac
Check if applicable	-		

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:

tAttach additional sheets, if necessary)

Please note the officer director title by the first letter of the office title:

P = President; V = Uice 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.

Xampie: XChange	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	D	Weston, III. George V	P.O. Box 2201
Add			Palm Beach, FL 33480
X Remove			
2) X Change	P	Jackson, Robert E. III	P.O. Box 2201
Add			Palm Beach, FL 33480
Remove 3.) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<del>_</del>	
Add			
Remove			
6) Change			_
Add			
Remove			

	06/06/2024		
The date of each amendment(s) ac	loption:		, if other than the
date this document was signed.			
	6/2024		
Effective date <u>if applicable</u> :	(no more than 90 da	ys after amendment file	dater
Note: If the date inserted in this bl document's effective date on the De		e statutory filing require	ements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
■ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board	d of directors without sh	nareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su		mber of votes east for th	ic amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through each voting group entitled to vote		
"The number of votes cast	for the amendment(s) was were so	afficient for approval	
bs		.**	
	(voting group)		
()6/()6/2()24 Dated			
Signature	1966EG	7	<b>A</b>
selected	rector, president or other officer—  f. by an incorporator—if in the had ed fiduciary by that fiduciary)		
	Robert E Jackson III		
	(Typed or printed name	e of person signing)	
	Director		

(Title of person signing)