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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: R. L. Plow field > Ussociates, Inc. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Evelyn Torres
Name of Contact Person Name of Contact Person

R. L. Plow Lield & Associaks, Inc.

Firm/ Company

801. N Orange Que 7t 730

Address

Orlando, FL 32801

City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (407) 923-7727

Area Code & Davtime Telephone Number Evelyn lorres Enclosed is a check for the following amount made payable to the Florida Department of State: X \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address

(Additional copy is

enclosed)

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

Certified Copy

(Additional Copy is enclosed)

Articles of Amendment to Articles of Incorporation of

(Doc	ument Number of Corporation (if k	nown)
Oursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	•	
A. If amending name, enter the new name of the	corporation:	
	· · · · · · · · · · · · · · · · · · ·	The new
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "In "chartered," "professional association," or the abb	c," or "Co". A professional con	orporated" or the abbreviation "Corp.," rporation name must contain the word
3. Enter new principal office address, if applicat	ble:	2
Principal office address <u>MUST BE A STREET Al</u>		924
		7700
		- Constant
		<u>ග</u>
. Enter new mailing address, if applicable:		711
(Mailing address MAY BE A POST OFFICE B	<u></u>	
		-
D. If amending the registered agent and/or registered new registered agent and/or the new registere Name of New Registered Agent	tered office address in Florida, ened office address:	
new registered agent and/or the new registere	ed office address:	
new registered agent and/or the new registere	ed office address:	
<u>Name of New Registered Agent</u>	ed office address:	
	ed office address:	
new registered agent and/or the new registere Name of New Registered Agent New Registered Office Address:	(Florida strect address)	. Florida
new registered agent and/or the new registere Name of New Registered Agent	(Florida strect address) (City) egistered Agent:	, Florida (Zip Code)

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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 I	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	CEO	Jeffrey Strager	801 N Orange Ave # 730 Orlands, FL 32801
Add			<u> </u>
Remove			
2) Change		*	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)				
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f an amendment provides for an excha	ange, reclassific:	ation, or cancella	ation of issue	d shares,	
provisions for implementing the amer	<u>idment if not co</u>	ntained in the ar	nendment its	elf:	
(if not applicable, indicate N/A)					
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	<u> </u>				
			-		
					**-
					

•:

The date of each amendment(s) adoption:, if other the date this document was signed.
·
Effective date <u>if applicable:</u> (no more than 90 days after amendment file date)
(no more than 90 days after amenament fite date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ 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)
Signature (By addirector, 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) (Typed or printed name of person signing)
(Typed or printed name of person signing) CEO
(Title of person signing)