Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000025795 3)))



H250000257953ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser fr	om this _: page.
Doing so will generate another cover sheet.	
To:	

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		

COR AMND/RESTATE/CORRECT OR O/D RESIGN PELICAN AV INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Fax: 8134365206

Articles of Amendment to Articles of Incorporation of

Pelican AV Inc.			
(Name of Corporation	n as currently filed with the Fl	lorida Dept. of State)	
P25000001124			
(Docume	ent Number of Corporation (if k	nown)	
Pursuant to the provisions of section 607,1006. Floridal its Articles of Incorporation:	Statutes, this <i>Florida Profit Cor</i>	rparation adopts the following an	nendment(s)
A. If amending name, enter the new name of the cor	poration:		
		Γh	e new
name must be distinguishable and contain the word "cor "Inc.," or Co.," or the designation "Corp," "Inc." "chartered," "professional association," or the abbrev	or "Co". A professional cor	orporated" or the abbreviation " poration name must contain th	Corp.," e word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD)</u>	RESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	9	2025 JA	error o '
		: 22 : 29	(
D. If amending the registered agent and/or registere new registered agent and/or the new registered o		iter the name of the	5
Name of New Registered Agent	inte address.	7: 51	•
	(Florida street address)		
New Registered Office Address:		, Florida	
	tCity)	(Zip Code	,

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.

1/22/2025 10:30,57 PST To: 18506176380 Page: 3/5 Fax: 8134365206

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 Doc 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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Namc</u>	<u>Addres</u> s
1) Change	Director	Barber, Gene	7901 4th St N
Add			STE 300
Remove			St. Petersburg FL 33702
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			····
Remove			

1/22/2025 10:30:17 PST - To: 18506176380 Page: 4/5 Fax: 8134365206

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	
11.4		
	.	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation ndment if not contained in the amend	<u>of issued_shares,</u> ment_itself;
	0.004.0	

The date of each amendment(s) date this document was signed.	ndoption: if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were action was not required.	lopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
	ne Barber director, president or other officer - if directors or officers have not been
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	Gene Barber
	(Typed or printed name of person signing)
	Director
	(Title of person signing)