## N1700000658

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	isiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
<u> </u>		

Office Use Only



800304676508

10/23/17--01006--002

∳÷70.00

9817 OCT 18 PM 2: 4

OCT 2.1 2017 C MCNAIR

## Articles of Amendment to Articles of Incorporation (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006. Florida Statutes, this Florida Not For 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" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. 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) (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.

Signature of New Registered Agent, if changing

address of each Officer (Attach additional sheet. Please note the officer/d P = President; V= Vice	and/or Director s, if necessary) lirector title by the President; T = Tra = Chief Financia	being added:  e first letter of the casurer; S= Second Officer. If an e	tle and name of each officer.  e office title: retary: D= Director; TR= Tri officer/director holds more the	ıstee; C = Chairı	man or Clerk; CEO = Ch	ief
	aves the corporat	ion, Sally Smith	ntly John Doe is listed as the is named the $V$ and $S$ . These s			
Example:  X Change X Remove X Add	PT John I V Mike SV Sally	<u>Jones</u>				1
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s		
1) Change Add Remove	D	Im	RE BEKE		East Morse en Park, F 32789	
2) Change Add	NJA		N/A			
Remove 3) Change Add	NJA	<del></del>	NIA			
Remove 4) Change Add	NIA	i	N/A			
Remove  5) Change  Add	N/A		1 / A			
Remove  6) Change Add	NJA		/A			
Remove			Page 2 of 4			

E. <u>If a</u>	mending or adding addit och additional sheets, if ned	ional Articles, enter chang ressary). (Be specific)	ge(s) here:			
· ·	IMRE	BEKE as an	Mãs	Never	to be	<del></del>
	Listed	as an	<u>047ia</u>	er	<del> </del>	
			_			
					<del></del>	
				<del></del>		
				<del> <u>.</u></del>		
	· · · · · · · · · · · · · · · · · · ·				·	
			·			
						1
						<del>-                                    </del>
						<del></del> -
						<del></del>
				<del></del>		<del>;</del>
				·	<del> </del>	<del>-  </del>
				<del> </del>		-
					<del> </del>	<del>-                                    </del>

The date of each amendment(s), adoption:	_, if other than the
late this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	1
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	e listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Dated $8-27-17$	
Signature WallAd JubiA	_
(By the chairman of vice chairman of the board, president or other officer-if directors	
have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	1
other court appointed fiduciary by that fiduciary)	1
Lalouna Lubin	
(Typed or printed name of person signing)	!
Posidot direction (Title of person signing)	
(Title of person signing)	J