P04000033997

| (Re | questor's Name) | | | |
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SECREIVARY OF STATE
AND ANASSEF, FLORID.

C. LEYNIS SEP 2 4 2013 EXAMINIER

COVER LETTER

| TO: Amendment Section Division of Corporations | | | | | | |
|--|--|--|--|--|--|--|
| NAME OF CORPORATION: Common Ground Enterprises July DOCUMENT NUMBER: P0400033997 | | | | | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | | | | |
| Please return all correspondence concerning this matter to the following: | | | | | | |
| Anthony Tedeoco Name of Contact Person Finn/Company 4015 Bayshore Blvd 8D Address Tanga FL 38101 City/State and Zip Code Ffmedican a gmail. com E-mail address: (to be used for future annual report notification) | | | | | | |
| For further information concerning this matter, please call: | | | | | | |
| Athon Tedes co at 813, 241-5399 Name of Contact Person Area Code & Daytime Telephone Number | | | | | | |
| Enclosed is a check for the following amount made payable to the Florida Department of State: | | | | | | |
| S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed) | | | | | | |
| Mailing Address Amendment Section Street Address Amendment Section | | | | | | |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

FILED

13 SEP 17 PH 3: 10 SEGRETARY OF STATE TALLAHASSEE, FLORIDA P04000033997

amendment(s) to

| (Document Number of Corporation (if known) |
|--|
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendments Articles of Incorporation: |
| A. If amending name, enter the new name of the corporation: A Common Crown d Inc. 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." |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) |
| C. Enter now mailing address, if applicable: (Mailing address MAY BB 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 |
| Minance of why westeress when't it croubing |

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)

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.

Example:

| X Change | PT | <u>John Doe</u> | | | |
|-------------------------------|--------------|-----------------|--------------|---------------------------------------|--------------|
| X Remove | Y | Mike Jones | / | | |
| X Add | <u>sv</u> | Sally Smith | | | |
| Type of Action (Check One) | <u>Title</u> | Name | | Address | |
| 1) Change | | | | | |
| Add | \bigcap | | / | | |
| Remove | | | | | |
| 2) Change | | | <i></i> | _ | |
| Add // | | | 1 // | 1 | |
| Remove | | | <i> -{}</i> | | |
| 3)(hange | - | - // | ' | _ | |
| A dd | | / / | // | | ··· |
| Remove | |] | ,V | J | |
| 4) Change | | - — | | No. | · |
| Add | | | | | |
| Remove | | / | | | . |
| 5) Change | | <u> </u> | | | · |
| Add | | | | | , |
| Remove | | | | | |
| δ) Change | | | | | |
| Add | | | | · · · · · · · · · · · · · · · · · · · | |
| Remove | | | | \$P\$\$P\$_6.5_EBU. | |
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| ending or adding additional Arti h additional sheets, if necessary). | (Be specific) |
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| amendment provides for an exch | hange, reclassification, or cancellation of issued shares, |
| isions for implementing the ame | endment if not contained in the amendment itself: |
| if not applicable, indicate N/A) | |
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| The date of each amendment(s) adoption: date this document was signed. | 9/13/13 | FILED if other than the 13 SEP 17 PM 3: 10 |
|---|--|--|
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) | SECRETARY OF STATE TALLAHASSEE, FLORIDA |
| Adoption of Amendment(s) | CHECK ONE) | |
| The amendment(s) was/were adopted by the shareholders was/were sufficient for | he shareholders. The number of votes cast for the amen or approval. | dment(s) |
| The ancudment(s) was/were approved by must be separately provided for each voti | the shareholders through voting groups. The following ing group entitled to vote separately on the amendment | statement (s): |
| "The number of votes cast for the an | nendment(s) was/were sufficient for approval | |
| by | 'n | |
| (| voting group) | |
| The amendment(s) was/were adopted by taction was not required. | he board of directors without shareholder action and sh | areholder |
| ☐ The amendment(s) was/were adopted by t action was not required. | he incorporators without shareholder action and shareholder | older |
| Dated 9 13 | 113 | |
| Signature | EAL | |
| (By a director, p | resident or other officer - if directors or officers have n | |
| | ncorporator - if in the hands of a receiver, trustee, or of iary by that fiduciary) | her court |
| appointed folice | Lary by that inductary) | |
| | (Typed or printed name of person signing) | |
| | (Typed or'printed name of person signing) | |
| | President | |
| | (Title of person signing) | |