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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
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*C. Lewis  
1-2-14*

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Baros Consulting Group, INC.  
DOCUMENT NUMBER: PO4000060016

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Susan m Champion  
Name of Contact Person  
Baros Consulting Group, INC.  
Firm/ Company  
4487 Belvedere Place  
Address  
Marietta GA 30067  
City/ State and Zip Code  
drchampion@drchampion  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Susan m Champion at (770) 235-1450  
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:

- \$35 Filing 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, FL 32314

\*Street Address

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

Articles of Amendment  
to  
Articles of Incorporation  
of

APPROVED  
AND  
FILED

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Baros Consulting Group, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PO4000060016

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

\_\_\_\_\_ *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 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*

**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:**

Change                      PT        John Doe

Remove                        V         Mike Jones

Add                              SV        Sally Smith

Type of Action  
(Check One)

Title

Name

Address

- |   |            |                         |                           |
|---|------------|-------------------------|---------------------------|
| 1) <input checked="" type="checkbox"/> Change   | <u>CEO</u> | <u>James K Champion</u> | <u>4487 Belvedere Pl</u>  |
| <input type="checkbox"/> Add                    |            |                         | <u>Marietta, GA</u>       |
| <input checked="" type="checkbox"/> Remove (SC) |            |                         | <u>30067</u>              |
| 2) <input type="checkbox"/> Change              | <u>CEO</u> | <u>Susan M Champion</u> | <u>4487 Belvedere Pl</u>  |
| <input checked="" type="checkbox"/> Add         |            |                         | <u>Marietta, GA 30067</u> |
| <input type="checkbox"/> Remove                 |            |                         | _____                     |
| 3) <input type="checkbox"/> Change              | _____      | _____                   | _____                     |
| <input type="checkbox"/> Add                    |            |                         | _____                     |
| <input type="checkbox"/> Remove                 |            |                         | _____                     |
| 4) <input type="checkbox"/> Change              | _____      | _____                   | _____                     |
| <input type="checkbox"/> Add                    |            |                         | _____                     |
| <input type="checkbox"/> Remove                 |            |                         | _____                     |
| 5) <input type="checkbox"/> Change              | _____      | _____                   | _____                     |
| <input type="checkbox"/> Add                    |            |                         | _____                     |
| <input type="checkbox"/> Remove                 |            |                         | _____                     |
| 6) <input type="checkbox"/> Change              | _____      | _____                   | _____                     |
| <input type="checkbox"/> Add                    |            |                         | _____                     |
| <input type="checkbox"/> Remove                 |            |                         | _____                     |

**E. If amending or adding additional Articles, enter change(s) here:**

*(Attach additional sheets, if necessary). (Be specific)*

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**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**

*(if not applicable, indicate N/A)*

100% of share in Baros Consulting Group, INC  
will be owned by Susan m champion.

All share to James K Champion will  
be no longer he will own 0%  
of shares in Baros Consulting  
Group, INC.

APPROVED  
AND  
FILED

The date of each amendment(s) adoption: December 20, 2013, if other than the date this document was signed. 13 DEC 23 PM 2: 54

Effective date if applicable: January 1, 2014  
*(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. 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)*

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 12/20/2013

Signature Susan M Champion  
(By a director, 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)

Susan M Champion  
(Typed or printed name of person signing)

CEO Baras Consulting Group  
(Title of person signing)