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SECRETARY OF STAFE STAFE OF COMPORATIONS

AUG 1 0 2016 C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: PUTTER AROUN	ID INCORPORATED	
DOCUMENT NUME	BER: P12000031796		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	BRIAN THOMAS		
		Name of Contact Person	1
	PUTTER AROUND INCOR	PORATED	
		Firm/ Company	
	P.O. BOX 541372		
		Address	
	GREENACRES, FL 33454		
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Cod	e
16-	· · · · · · · · · · · · · · · · · · ·	• •	
goirg	uy561@gmail.com	16 6	
	E-mail address: (to be us	sed for future annual report	nouncation)
For further information	n concerning this matter, pleas	se call:	
Richard Conragan		at (⁹⁵⁴	444-3360
Name o	of Contact Person		de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment 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)
Ame Divi	ling Address Indment Section Is sion of Corporations Box 6327	Amend Division	Address Iment Section on of Corporations Building
	ahassee, FL 32314	2661 E	executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE UIVISION OF CORPORATION

2016 AUG - 1 PM 12: 43

PUTTER AROUND INCORPORATED	
(Name of Corporation :	as currently filed with the Florida Dept. of State)
P12000031796	
(Document	t Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	oration:
N/A	The new
	'corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	1515 15TH LANE
(Principal office address MUST BE A STREET ADDRE	GREENACRES, FL 33463
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. BOX 541372
(1.141.14)	GREENACRES, FL 33454
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 off	ice address:
Name of New Registered Agent N/A	
· PARTATE OF A SECULO A SECUE A SECULO A SECUE A SECULO A	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe	pred Agent
I hereby accept the appointment as registered agent. I am	
Cinuater	re of New Registered Agent, if changing
JIKNOIN	O DI TON TOCKISCION TICCIN, II CHANGINX

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.

X Change	PT J	lohn Doe	
X Remove	<u>V</u> !	Mike Jones	
X Add	<u>sv</u> . <u>s</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	<u>p</u>	Richard Conragan	8561 NW 53rd Street
Add			Lauderhill, FL 33351
XX Remove			
2) Change	P	Brian Thomas	1515 15th Lane
XX_Add			Greenacres, FL 33463
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change			
Add	171 		
Remove			

	(Be specific)
A	
	
	
	
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If an amendment provides for an exch provisions for implementing the ame	ndment if not contained in the amendment itself:
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provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

N/A	F# F1
The date of each amendment(s) adoption:	JUNION DE CONTRACTION
date this document was signed.	JIVISION OF CORPORATION
August 1, 2016 Effective date if applicable:	2016 AUG - 1 PM 12: 43
(no more than 90 da	ys after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	nber of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes cast for the amendment(s) was/were su	fficient for approval
by	,"
by	We was a second of the second
☐ The amendment(s) was/were adopted by the board of directors with action was not required.	out shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without action was not required.	shareholder action and shareholder
Dated	
Signature	
(By a director, president or other officer - selected, by an incorporator - if in the har appointed fiduciary by that fiduciary)	
Brian Thomas	
(Typed or printed name	e of person signing)
President	ff.
Title of pe	erson signing)