## P30000619

| (Re                     | questor's Name)    | <del></del> |
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| (Ĉit                    | ry/State/Zip/Phone | e #)        |
| PICK-UP                 | WAIT               | MAIL        |
| (Bu                     | ısiness Entity Nan | ne)         |
| (Dc                     | ocument Number)    |             |
| Certified Copies        | _ Certificates     | of Status   |
| Special Instructions to | Filing Officer:    |             |
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March 28, 2014

BENJAMIN H DAVIS 6015 MORROW ST EAST STE 209 JACKSONVILLE, FL 32217

SUBJECT: PCI CONSULTANTS, INC

Ref. Number: P13000026199

We have received your document for PCI CONSULTANTS, INC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 814A00006656

Rebekah White Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION: NOW HIRI  | ng Heroes, I  | nc.  |
|--|---|--|
| DOCUMENT NUMBER: P13000026   | 6199  |  |
| The enclosed Articles of Amendment and fee are su  | ebmitted for filing.  | ,  |
| Please return all correspondence concerning this ma  | tter to the following:  |  |
| Benjamin H. Davis  |   |  |
|  | (Name of Contact Person   | n)   |
| Now Hiring Heroes, Inc.  | •   |  |
|  | (Firm/ Company)   |  |
| 6015 Morrow St. East, S  | Suite 209   |  |
|  | (Address)   |  |
| Jacksonville, FL 32217   |   |  |
|  | (City/ State and Zip Cod  | е)   |
| ben@nowhiringh   | neroes.com  |  |
|  | ed for future annual report   | notification)  |
| For further information concerning this matter, pleas  | se call:  |  |
| Benjamin H. Davis  | <sub>at</sub> 904   | 323-4600   |
| (Name of Contact Person)   | (Area C   | ode & Daytime Telephone Number)  |
| Enclosed is a check for the following amount made  | payable to the Florida Depa   | artment of State:  |
| \$35 Filing Fee \$\times \text{\$\text{\$\text{\$\text{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 | Ameno<br>Divisio<br>Clifton   | Address Iment Section on of Corporations Building Executive Center Circle              |

Tallahassee, FL 32301

## **Articles of Amendment** to Articles of Incorporation of

FILED

|  | 01 .                                  | 14 APR - 1 階 2                        |
|--|---------------------------------------|---------------------------------------|
| PCI Consultants, Inc.  |                                       |                                       |
| (Name of Corporation as currently filed with t   | the Florida Dept. of State)           | SEGNERANT OF STA<br>TALLAHASSEE, FLOR |
| P13000026199   |                                       | www.com                               |
| (Document Numbe  | er of Corporation (if known)          |                                       |
| Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:   | Statutes, this Florida Not For Profit | t Corporation adopts the following    |
| A. If amending name, enter the new name of the cor   | rporation:                            |                                       |
| Now Hiring Heroes, Inc.  |                                       | The new                               |
| name must be distinguishable and contain the word "co<br>"Company" or "Co." may not be used in the name. | orporation" or "incorporated" or th   |                                       |
| B. Enter new principal office address, if applicable:  | 6015 Morrow Str                       | eet, East                             |
| (Principal office address MUST BE A STREET ADDI  |                                       |                                       |
|  | Jacksonville, FL                      | 32217                                 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX                   | 6015 Morrow Str                       | eet, East                             |
|  | Suite 209                             | _                                     |
|  | Jacksonville, FL                      | 32217                                 |
| D. If amending the registered agent and/or registere new registered agent and/or the new registered o    |                                       | the name of the                       |
| New Registered Office Address:   | (Florida street address)              |                                       |
|  | (City)                                | Florida                               |
|  | (City)                                | (Zip Code)                            |

Page 1 of 4

Signature of New Registered Agent, if changing

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

## 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 X Remove X Add | <u>PT</u><br><u>V</u><br><u>SV</u> | John Doe<br>Mike Jones<br>Sally Smith |   |
|----------------------------------|------------------------------------|---------------------------------------|---|
| Type of Action<br>(Check One)    | <u>Title</u>                       | <u>Name</u>                           | <u>Addres</u> s                         |
| 1) Change                        |                                    |                                       | <br>                                    |
| Add                              |                                    |                                       |   |
| Remove                           |                                    |                                       | *************************************** |
| 2) Change                        |                                    |                                       | <br>                                    |
| Add                              |                                    |                                       |   |
| Remove                           |                                    |                                       |   |
| 3) Change                        |                                    |                                       | <br>******                              |
| Add                              |                                    |                                       |   |
| Remove                           |                                    |                                       |   |
| 4) Change                        |                                    |                                       |   |
| Add                              |                                    | _                                     |   |
| Remove                           |                                    |                                       |   |
| 5) Change                        | <u>,</u>                           |                                       |   |
| Add                              |                                    |                                       |   |
| Remove                           |                                    |                                       |   |
| 6) Change                        |                                    |                                       |   |
|                                  |                                    |                                       |   |
| Add                              |                                    |                                       |   |
| Remove                           |                                    |                                       |   |

| E. If amending or adding additional Art (attach additional sheets, if necessary).  | (Be specific)  |
|--|--|
|  |  |
| N/A  |  |
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| The date of each amendi  | •   | , if other than the |
|--|---|---------------------|
| date this document was significated the document was significated the date if applicated th | March 31 2014   |                     |
| <u> </u>   | (no more than 90 days after amendment file date)  | _                   |
| Adoption of Amendment  | (s) ( <u>CHECK ONE</u> )  |                     |
| ☐ The amendment(s) w was/were sufficient f   | as/were adopted by the members and the number of votes cast for the amendment(s) or approval.   |                     |
| There are no member adopted by the board   | s or members entitled to vote on the amendment(s). The amendment(s) was/were of directors.  |                     |
| Dated _  | March 24, 2014  |                     |
| Signature  | 2002  |                     |
| (B   | whe chairman or vice chairman of the board, president or other officer-if directors ive not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary) |                     |
| Benj   | amin H. Davis   |                     |
|  | (Typed or printed name of person signing)   |                     |
| Pres   | ident   |                     |
|  | (Title of person signing)   |                     |