P1300042440

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COVER LETTER

To: Amendment Section
Division of Corporations

NAME OF CORPORATION: Khaki Blue Bones, Inc.

DOCUMENT NUMBER: P13000042440

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

Please return all correspondence concerning this matter to the following:

Tom DuBransky

Name of Contact Person		
	Firm/ Company	
19749 Bahama St.		
	Address	
Northridge, CA 91324		
	City/ State and Zip Code	

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 $\frac{\text{Tom DuBransky}}{\text{Name of Contact Person}} = \frac{\text{at } \left(\frac{310}{}\right)}{\text{Area Code & Daytime Telephone Number}}$

Enclosed is a check for the following amount made payable to the Florida Department of State:

■ \$35 Filing Fee

Certificate of Status

Certificate of Status

Certificate of Status

Certified Copy
(Additional copy is enclosed)

(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

Khaki Blue Bones, Inc.	
(Name of Corporation as currently f	iled with the Florida Dept. of State)
P13000042440	
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fla</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co word "chartered," "professional association," or the abbreviation "P.,	"company," or "incorporated" or the abbreviation ". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	77 cc 20
	2018 DE
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:	F T
Name of New Registered Agent	7
	2:
(Florida street	
New Registered Office Address:	Florida
(Ci	
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent.—I am familiar with	i and accept the obligations of the position.
Signature of New Regi	stered 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: X Change	<u>PT</u> <u>Johr</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	PCFOT	Victor Holloway	318 Settlers Lane
Add			Charlotte, NC 28202
Remove			
2) X Change	<u>s</u>	Tom DuBransky	4462 Rhodelia Ave.
Add			Claremont, CA 91711
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
-
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)
The Articles of Incorporation, which were amended on March 26, 2015, are hereby further amended to reflect
the following shareholder ownership of the one-thousand (1000) authorized shares.
Victor Holloway (1000 shares)
Tom DuBransky (0 shares)

The date of each amendment(s) adoption:	, if other than the
date this document was signed. August 10, 2018	
Effective date <u>if applicable</u> : (no more than 90 days after amendment	file date)
Note: If the date inserted in this block does not meet the applicable statutory filing red document's effective date on the Department of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.	or the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the a	
"The number of votes cast for the amendment(s) was/were sufficient for approval	I
by(voting group)	
 □ The amendment(s) was/were adopted by the board of directors without shareholder action was not required. □ The amendment(s) was/were adopted by the incorporators without shareholder action a action was not required. 	
August 10, 2018 Dated	
Signature Jon Debrie	
(By a director, president or other afficer – if directors or office selected, by an incorporator – if in the hands of a receiver, tru appointed fiduciary by that fiduciary)	ers have not been ustee, or other court
Tom DuBransky	
(Typed or printed name of person signing)	
President	
(Title of person signing)	