P13000097411

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL.
(Bu	usiness Entity Name)	<u> </u>
(Do	ocument Number)	
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SECRETARY OF STATE

LANCE OF CORPORATIONS

14 OCT 23 PM 1: 56

COVER LETTER

TO: Amendment Section Division of Corpora		, ,	,
Division of Corpora		I = I	
NAME OF CORPORA	ATION: Ue	mory C	ouns Inc
DOCUMENT NUMBE	:R: 136	0009741	1
The enclosed Articles of	Amendment and fee are su	ibmitted for filing.	
Please return all correspondent	ondence concerning this ma	tter to the following:	
	Vice	LIE E WA	etzel
	AD C	Name of Contact Person	BUNS INC
	/(Firm/Company O/ EAST	HIGHWAY 50
	Cle	RMONT 1	E/ 34711
		City/ State and Zip Cod	e
	J- 1	IETZEL E	2 HOTMAIL. COM
	E-mail address: (to be us	sed for future annual report	notification)
For further information of	concerning this matter, pleas	se call:	
VICKIE	E.E. WETE	EL at 352	-, 5520165
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he 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)
<u>Mailir</u>	ig Address	Street	Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)	
P1300099411 CLERMONT GUNS INC.	
(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 amerits Articles of Incorporation:	idment(s) to
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 abbrevia "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A."	ation .
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	338
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	STATE OF STA
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:	
11 mc E Meret	
Name of New Registered Agent VICKIE E WETELL 101 BAST HICHWAY 50 CLERMS	NT-1
(Florida street address)	711
New Registered Office Address: Cleryowt, Florida 34711 (City), Florida (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:	
Thereby accept the appointment as registered agent. I amfamiliar with and accept the obligations of the position.	
Viche & Welse	
Signature of New Registered Agent, of 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	PT John D	<u>oe</u>	
X Remove	<u>V</u> Mike Jo	<u>ones</u>	
X Add	SV Sally S	mith	
Type of Action (Check One)	Title	Name SUSTIN M Wetze	Address Address ALCHUALTS
Change Add			10/ E. HIGHWAYSO Clermont, F1 34711
Remove 2) Change Add	PRES	VICKIE E Wetzel	101 E HIGHWAY50 CLERMONT, FI
Remove 3) Change Add			34711'
Remove 4) Change			
Add Remove			
5) Change			
Remove 6) Change			
Add			

Attach additional s	Iding additional Articles, enter Sheets, if necessary). (Be speci		
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	Mange	, fusion	of loop,
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		/	
			<u>.</u>
			•
	provides for an exchange, recla plementing the amendment if i		
(if not applied	able, indicate N/A)		
			
			
			<u></u>

The date of each amendment(s) adoption: 10 15 2014	_, if other than the
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)	
(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 19/15/2014	
Signature / /	
(By a discor, 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)	_
JUST IN M WOTZEL	
(Typed or printed name of person signing)	
PRESIDENT (Title of person signing)	_