| (Re                       | questor's Name)   |             |
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| PICK-UP                   | ☐ WAIT            | MAIL        |
|                           |                   |             |
| (Bu:                      | siness Entity Nar | ne)         |
|                           |                   |             |
| (Do                       | cument Number)    |             |
|                           |                   |             |
| Certified Copies          | Certificates      | s of Status |
|                           |                   |             |
| Special Instructions to   | Filing Officer    |             |
| Opecial instructions to ( | ang onlest.       |             |
|                           |                   |             |
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Office Use Only



01/03/17--01008--016 \*\*35.00

JAN 03 2016 R. WHITE

## **COVER LETTER**

TO: Amendment Section

| Division of Corpor        | ations  |  |  |
|---------------------------|---|--|--|
| NAME OF CORPORA           | RTION: Unc  | ler Wraps  | CORP   |
| DOCUMENT NUMBI            | ER:   |  | <del></del> .  |
| The enclosed Articles of  | f Amendment and fee are sub   | omitted for filing.  |  |
| Please return all corresp | ondence concerning this mat   | ter to the following:  |  |
| ;<br>· -                  | Gir   | Name of Contact Person   | n Yani   |
| -<br>-                    | 1703 A Ta/lahas E-mail address: (to be us                                   | Firm/ Company  Place ed  Address  City/ State and Zip Code         |  |
| For further information   | concerning this matter, pleas   | e call:  |  |
| ·                         |   | at (   | )<br>de & Daytime Telephone Number   |
| Name o                    | f Contact Person  | Area Co  | de & Daytime Telephone Number  |
| Enclosed is a check for   | 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<br>Divi<br>P.O.       | ling Address  ndment Section sion of Corporations Box 6327 hassee, FL 32314 | Ameno<br>Divisio<br>Cliftor  | Address  dment Section on of Corporations on Building Executive Center Circle          |

Tallahassee, FL 32301

## Articles of Amendment

to
Articles of Incorporation
of

17 JAN -3 PH 2: 28

| Under woods  | INC  | 9E(#17/#)                         | rial#<br>nulk    |
|--|--|-----------------------------------|------------------|
| (Name of Corporation as curren   | tly filed with the Florida Dept.           | of State) Nt Living               | <del></del> 여 (왕 |
| P160000 819  | 06   |                                   |                  |
| (Document Numb   | er of Corporation (if known)               | ,                                 | <del></del>      |
| suant to the provisions of section 607.1006, F   | lorida Statutes, this <i>Florida Profi</i> | it Corneration adopts the follow  | มเก๋อ amendmen   |
| Articles of Incorporation:   | · · · · · · · · · · · · · · · · · · ·      | v es por anois adopts me tomo     | mig amonamen     |
| If amending name, enter the new name of t  | he cornoration:                            |                                   |                  |
| 41 /   | 0 00                                       |                                   |                  |
| me must be distinguishable and contain the   |  | " or "incorporated" or the        | The new          |
| orp.," "Inc.," or Co.," or the designation "   | Corp," "Inc," or "Co". A prof              | fessional corporation name mi     | ist contain the  |
| rd "chartered," "professional association," o  | r the abbreviation "P.A."                  |                                   |                  |
| Enter new principal office address, if appli   |  |                                   | ·                |
| incipal office address <u>MUST BE A STREET</u>   | (ADDRESS)                                  | •                                 |                  |
|  | · · · · · · · · · · · · · · · · · · ·      |                                   | <del> </del>     |
| •  |  |                                   |                  |
| Enter new mailing address, if applicable:  |  |                                   |                  |
| (Mailing address MAY BE A POST OFFIC   | <u>E BOX</u> )                             |                                   |                  |
|  |  |                                   | <del></del>      |
|  |  |                                   | `.               |
| •  |  |                                   |                  |
| If amending the registered agent and/or re<br>new registered agent and/or the new regist |  | la, enter the name of the         |                  |
| new registered agent and/or the new registered   | tered office address.                      | •                                 |                  |
| Name of New Registered Agent   |  | <u> </u>                          | •                |
|  |  |                                   |                  |
|  | (Florida street address)                   |                                   | •                |
| New Registered Office Address:   |  | , Florida                         |                  |
| •  | (City)                                     | (Zip Code)                        | )                |
|  | •  |                                   |                  |
| ew Registered Agent's Signature, if changin  | a Dagistared Agents                        | •                                 | •                |
| ereby accept the appointment as registered as  |  | ept the obligations of the positi | on.              |
|  | · ,  |                                   |                  |
| Cionatrip  | e of New Registered Agent if cha           | maina ,                           | •                |

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>    | John Doe                              | ,   |           | •             |
|-------------------------------|--------------|---------------------------------------|-----|-----------|---------------|
| X Remove                      | <u>v</u>     | Mike Jones                            |     |           |               |
| X Add                         | <u>sv</u>    | Sally Smith                           |     |           |               |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u>                           |     | Address   | ·             |
| 1) Change                     | <del>,</del> | _                                     | P.  |           |               |
| Add                           |              |                                       |     | ·         |               |
| Remove                        |              |                                       |     |           | <u> </u>      |
| 2) Change                     |              | <u> </u>                              | · · |           |               |
| Add                           |              | ·                                     |     |           |               |
| Remove 3) Change              |              |                                       |     |           | <u> </u>      |
| Add                           |              |                                       | -   |           |               |
| Remove                        |              |                                       |     |           | ·             |
| 4) Change                     |              | · · · · · · · · · · · · · · · · · · · |     |           |               |
| Add                           |              |                                       |     |           |               |
| Remove                        |              |                                       |     |           | - <del></del> |
| 5) Change                     |              |                                       | · . |           |               |
| Add                           |              |                                       |     |           | ·<br>         |
| Remove                        |              | •                                     |     | -         |               |
| 6) Change                     |              |                                       | ·   |           |               |
| Add                           |              |                                       |     | _ <u></u> |               |
| Remove                        |              |                                       |     |           |               |

|   | icles, enter change(s) here: (Be specific)   |
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| f an amendment provides for an exch   | hange, reclassification, or cancellation of issued shares,   |
| provisions for implementing the ame   | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| f an amendment provides for an exch<br>provisions for implementing the ame<br>(if not applicable, indicate N/A) | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| provisions for implementing the ame   | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| provisions for implementing the ame   | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
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| provisions for implementing the ame   | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| provisions for implementing the ame   | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |

| The date of each amendment(s) adoption:  | , if other than the |
|--|---------------------|
| Effective date if applicable:  |                     |
| (no more than 90 days after amendment file date)   |                     |
| 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  |                     |
| Signature  |                     |
| (By 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) |                     |
| (Typed or printed name of person signing)  |                     |
| (Typed of printed name of person signing)  | ,                   |
| (Title of person signing)  |                     |