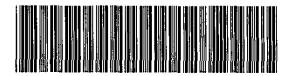
P17000099592

(Requestor's Name)
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(Document Number)
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Amendices

MAY 0 7 2018 I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Greg Poleman Enterprises INC. DOCUMENT NUMBER: P170000 99592							
DOCUMENT NUMBER: <u>P170000 99592</u>							
The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
Name of Contact Person Greg Poleman Fnter Prises INC Firm/ Company 1885 NS 53 rd Street Address Pompano Beach Florida 33064 City/ State and Zip Code Poleman @ Shcglobal.net E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
Greg Poleman at (832) 409-9623 Name of Contact Person 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 Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee Certified Copy is enclosed) Certified Copy is enclosed)							
Mailing Address Amendment Section 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

Greg Poleman Enterprises, TNC. (Name of Corporation as currently filed with the Florida Dept. of State) P170000 99592 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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)

Remove

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	<u>PT</u>	John Do	<u>e</u>				
X Remove	<u>v</u>	Mike Jos	nes				
_X Add	<u>sv</u>	Sally Sm	<u>iith</u>				
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	•			<u>Addres</u> s
1)Change		_					
Add						,	
Remove	r						
2) Change		_					
Add							
Remove							
3) Change		_					
Add							
Remove							
4) Charac							
4) Change		_				- .	
Add Remove			•				
Kelliove							
5)Change		_			·	-	
Add							
Remove							
6) Change							
Add		_				-	

Attach additional sheets, if necessary).	(Be specific)
	•
	
	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(if not applicable, maicule NA)	
	nber of Shanes From 10,000
	ober Of Shanes From 10,000 Cf.40 per Shane

The date of each amendment(s) adoption:	, if other than th
date this document was signed.	·
Effective date f applicable: (no more than 90 days after amendment file	date)
(no more name 20 days aper amenanens file	
Note: If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	ments, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	e amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The foliomust be separately provided for each voting group entitled to vote separately on the amendment	
"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 a action was not required.	and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and s action was not required.	hareholder
Dated 4 Pril 30, 2018	
Signature	
(By a director, president or other officer – if directors or officers l	nave not been
selected, by an incorporator – if in the hands of a receiver, trustee	, or other court
appointed fiduciary by that fiduciary)	
George G. Poleman	
(Typed or printed name of person signing)	
President (Title of person signing)	
(Title of person signing)	