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(Re	equestor's Name)	
(Ad	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ві	ısiness Entity Nar	ne)
(Dc	ocument Number)	
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COVER LETTER

Division of Corporations NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: at (959) 560 - 7802 Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

TO: Amendment Section

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

is enclosed)

Articles of Amendment

	Articles of Amendment to	,		• 0.
	Articles of Incorporation of	13 A	AY -6 AM 10:	
LANA BELL P.A.		TAKECKE	MAM 10:	٠,
(Name of Corporation as curre	ently filed with the Florida Dept. of S	State)	SS. OF ST.	-17 ₄
P 13 00000 2 198		τ	- CE, FLORA	Š.
(Document Num	iber of Corporation (if known)			74
ursuant to the provisions of section 607.1006, a Articles of Incorporation:	Florida Statutes, this <i>Florida Profit C</i>	orporation add	opts the followin	ig amendme
. If sinending name, enter the new name of	the corporation:			
				_The new
Furtan wave main simple 50 as address 10 as all	Hackle.			
Principal office address <u>MUST BE A STREE</u>	<u>T ADDRESS</u>)			
3. Enter new principal office address, if application office address MUST BE A STREE. C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or registered agent and/or the new registered Agent Name of New Registered Agent	T_ADDRESS) CE BOX) egistered office address in Florida, e	nter the name	e of the	-
Principal office address MUST BE A STREE. C. Enter new mailing address, if applicable: (Mading address MAY BE A POST OFFICE) D. If amending the registered agent and/or registered agent and/or the new regis	T_ADDRESS) CE BOX) egistered office address in Florida, e	nter the name	e of the	- -
Principal office address MUST BE A STREE. C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or registered agent and/or the new regis	TADDRESS) CE BOX egistered office address in Florida, e	nter the name	e of the	-

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)

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 Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
_X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Nune</u>	<u>Addres</u> s
1) Change	Pusines LANA BELL	LEDSI COLLIN AM ASSO, Senny Bles, Fl 33160
Add Remove		<u> Xenny 1869, Fi 33</u> 160
2) Change	S, D GARA BELL	
Add		
X Remove		
3) Change		
Add		
Remove		
4) Y Change	Presiden Lear BELL	
Add		
Remove		
5) Change		
Add		
Remove		
δ) Change		
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an amendme	mt provides	for an exch	ange, reclas	sification, or c	nncellation of iss	ned shares.	
rovizions for		ng the amer			the amendment		
(if not app	,						
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(if not app			24.786.77				
(if not app							

The date of each amendment(s) as	dention: (+ 36.1.3
ffective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
doption of Amendment(x)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were sa	opted by the shareholders. The number of votes cast for the amendment(s) efficient for approval.
The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statement 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)
action was not required. The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated9/3	<u>30/13</u>
Signature	Done -
	bector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other count
	ted fiduciary by that fiduciary)
••	
	JAM DEW
	(Typed or printed name of person signing)
	President
	(Title of person signing)