431999

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SECRETARY OF STATE
TALLAHASSEE FLORING

Cryper Charles

COVER LETTER

TO: Amendment Section Division of Corporations	•	
NAME OF CORPORATION: _	Fast of Florida, Inc	
DOCUMENT NUMBER:	431999	
The enclosed Articles of Amendm	ent and fee are submitted for filing.	
Please return all correspondence c	oncerning this matter to the following:	
·	MELISSA VAUGHAN	
	Name of Contact Person	
	Fast of Florida, Ine	
-	13003 - US Hwy 19. N. Address	
<u>Cle</u>	carwater, FL 33764 City/ State and Zip Code	
	ILGHAND FASTOFFLORIDA. COM Iress: (to be used for future annual report notification)	<u>!</u>
For further information concerning	g this matter, please call:	,
MFUSSA VAC Name of Contact Person	at (727) 545-873 Area Code & Daytime Telephone N	
Enclosed is a check for the follow	ing amount made payable to the Florida Department of	`State:
\$35 Filing Fee \$43.75 Filing Certificate	(Additional copy is enclosed) Cert	50 Filing Fee ificate of Status ified Copy ditional Copy is enclosed)
Mailing Address	Street Address	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

$\int \int $	of of		
	ovida, Inc.		
(Name of Corporation as curre	ently filed with the Florid	a Dept. of State)	
	73/999		
(Document Num	nber of Corporation (if kno	own)	
ursuant to the provisions of section 607.1006 mendment(s) to its Articles of Incorporation:	6, Florida Statutes, this <i>F</i>	lorida Profit Corporation adopts the follo	owing
a. If amending name, enter the new name of	f the corporation:		
		The new	
ame must be distinguishable and contain be bbreviation "Corp.," "Inc.," or Co.," or the ame must contain the word "chartered," "pro	designation "Corp," "Inc	c," or "Co". A professional corporation	
B. Enter new principal office address, if app			
Principal office address <u>MUST BE A STREE</u>	T ADDRESS)		
			
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)		FILED 9:AUG 13 -AM I ECIRLIARY OF S LLAHASSEE, FILE]
). If amending the registered agent and/or 1	registered office address i	in Florida, enter the name of the	
new registered agent and/or the new regi		25 00	
Name of New Registered Agent:			
New Registered Office Address;	(Florida street	address)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing the hereby accept the appointment as registered as		and accept the obligations of the position.	
<u></u>	Signature of New Registere	ed 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VP</u>	DAVID VENIER	10190-63AV.N. SEMINDLE, FL 33772	Add □ Remove
			
	additional sheets, if necessary). (Be sp		
	nmendment provides for an exchange,		
	tions for implementing the amendment not applicable, indicate N/A)	if not contained in the amendmen	nt itsell:
	T		
			

The date of each amendment(s) ac	option:
Effective date <u>if applicable</u> :	(date of adoption is required) (15 - 15 - 2017) nore than 90 days after amendment file date)
(no	nore than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adby the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statemen each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	or the amendment(s) was/were sufficient for approval
by(vot	ng group)
The amendment(s) was/were ad action was not required.	pted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ad action was not required.	pted by the incorporators without shareholder action and shareholder
Dated_08-/6	
Signature	lelissa Vaughan
selected.	ector, president or other officer – if directors or officers have not been by an incorporator —if in the hands of a receiver, trustee, or other court I fiduciary by that fiduciary)
_	MELISSA VAUGHAN
	(Typed or printed name of person signing)
	PKESIDENT
	(Title of person signing)