

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Walle)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300306400383

12/15/17--01018--008 **43.75

WILLIAM SSEEFFER TO

DEC 18 2017
T. LEDAKET



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: THE CO	envas sha	p; Inc.
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this mat	tter to the following:	
_	Name of Contact Person S Shop I Firm/ Company	
1035 Wi	Imer Ave	. •
Orlande	Address Of FL 328 City/ State and Zip Cod-	08
For further information concerning this matter, pleas		nottreation)
Cheryl Roitman	at (<u>407</u>	de & Daytime Telephone Number
Enclosed is a check for the following amount made p		
S35 Filing Fee S43.75 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)
Mailing Address Amendment Section	Amend	Address Iment Section

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 Com-	anation as annually Glad with the Florida Don	t of State)
	poration as currently filed with the Florida Dep	t. of State)
The Canvas sh		
(1	Document Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, I its Articles of Incorporation:	Florida Statutes, this <i>Florida Profit Corporation</i> a	dopts the following amendment(s) to
A. If amending name, enter the new name of	the corporation:	
	e word "corporation," "company," or "incorp "Corp," "Inc," or "Co". A professional corpor or the abbreviation "P A."	
B. Enter new principal office address, if appl (Principal office address <u>MUST BE A STREET</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u>F BOX</u>)	
D. If amending the registered agent and/or re new registered agent and/or the new registered Agent Name of New Registered Agent	egistered office address in Florida, enter the natered office address:	ne of the
		
	(Florida street address)	
New Registered Office Address:	(City)	. Florida(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag	g Registered Agent; gent. I am familiar with and accept the obligation	is of the position.
		22 mm
	Signature of New Registered Agent, if changing	RSSEE, FLORI

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 Do	<u>)e</u>		
X Remove	<u>V</u>	Mike Jo	ones		
X Add	<u>SV</u>	Sally St	nith		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) Change		<u></u>	Haviv	Roitman	635 Wilmer Ave
X Add					Orlando FL
Remove					32808
2) Change		_			
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change		_			
Add					
Remove					
Change		-			
Add					
Remove					

Attach additional s	ding additional Artsheets, if necessary).	(Be specific)				
						
				· · · -		
		.				
						
			- · ·	· ·		
· · · ·						
						
						·
f an amendment	provides for an exc	hange, reclassifi	cation, or cance	llation of issued s	hares,	
provisions for im (if not applica	plementing the amouble, indicate N/A)	<u>endment if not c</u>	ontained in the s	<u>amendment itself:</u>		

The date of each amendment(s) adoption: December 14,2017 , if other than the date this document was signed.
Effective date if applicable: December 14, 2017
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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 December 14,2017
Signature Pour
(By a 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)
Boris Roitman (Typed or printed name of person signing)
President
(Title of person signing)

. . . .