549642

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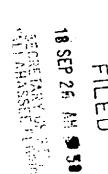
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: J. L. K	CKOLAK PENTY COPP.		
DOCUMENT NUMBER: # 54964			
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this i	matter to the following:		
JEGOICA	CORO Name of Contact Person		
	Name of Contact Person		
THE KYGLAK	Firm/ Company		
	AILAKES DR Address		
	Address		
MIAMILAKES FL 33016 City/ State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, pl	ease call:		
JESSICA COPO	at (305) 364 4133 Area Code & Daytime Telephone Number		
Name of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount made	de payable to the Florida Department of State:		
\$35 Filing Fee Sectificate of Status	Se S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address	Street Address		
Amendment Section	Amendment Section		
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

1 1	FIGLAK	DEALTH	1000
J. 1.	ドルクレイナ	FEALIG	(()1(-

(Name of Corporation as current	ly filed with the Florida Dept. of State)
# 5496A2	
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	'Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NA
	- 30 T
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A BE B
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	<u>ress in Florida, enter the name of the</u> s:
Name of New Registered Agent Name	
(K1 I)	reet address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent	
I hereby accept the appointment as registered agent. I am familiar	
Signature of New 1	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>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	JAY I. KIGLAK	7900 MIAMI LAKES DR
Add			MIAMI LAKES, FL33016
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

<u>If amending</u> (Attach <i>addi</i>	e or adding additional Articles, enter change(s) here: tiopal sheets, if necessary). (Be specific)	
Ş	N/A	
	dment provides for an exchange, reclassification, or cancellation of issued shares,	
if not	for implementing the amendment if not contained in the amendment itself: applicable, indicate N/A)	
	/A-	
	 	_

t ne date of each amendment(s) adopt date this document was signed.	ion:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file de	ate)
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requiremment of State's records.	ents, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes cast for the a ent for approval.	imendment(s)
	ed by the shareholders through voting groups. The follow th voting group entitled to vote separately on the amenda	
"The number of votes cast for t	he amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action an	d shareholder
☐ The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	areholder
Dated 9/21	2018	
Signature		
selected, by	or, president or other officer – if directors or officers have an incorporator – if in the hands of a receiver, trustee, of iduciary by that fiduciary)	
_	THOMAS DARTELMO (Typed or printed name of person signing)	
	DIPE: Top 1 - 1 00 110 00	