588674

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
	WAIT	
(Bu	isiness Entity Nai	me)
(Do	ocument Number))
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DIVISION OF CORPORATION

DEC 1 6 2015 C LEWIS

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPOR	ATION: Red M.	ule, Inc.		
	ER: 588674			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this mat	tter to the following:		
	Dave	Name of Contact Person	ler	
	Red Mule, Inc.			
1208 S Broad St				
-		Address		
	Brooksville, FL 34601 City/State and Zip Code			
davehde ymail. com				
E-mail address: (to be used for future annual report notification)				
For further information	concerning this matter, pleas	e call:		
Dave	Dannemiller	at (352	, 442-3912	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mail	ling Address	Stand	Adduses	

Mailing Address

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

Articles of Amendment

to

Articles of Incorporation

Ut			
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Red Mule	., Inc.
	filed with the Florida Dept. of State)
5886	74
(Document Number of	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	15 DEC 14 1411:09
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	
Name of New Registered Agent Dave Danne	emiller
266 Lar	et address)
New Registered Office Address: Brooksville	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	ith and accept the obligations of the position.
(K) cano	anuelly
Signature of New Re	gistered 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	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	SV Sally	Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PST	Jinkens, Tim L.	204 Dogwood Dr
Add			Brooksville, FL
Remove			34601
2) Change	PGEO	Dave A. Dannemiller	266 Lark Ave Brookruille, FL 34601
Remove			
3) Change	V <u>CFO</u>	Kathy Dannemiller	266 Lark Ave Brookwille FL 3460
Remove			,
4) Change		John Bonema	217 Kentdale PL San Jose, CA
X Add			
Remove			95126
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Artic attach additional sheets, if necessary).	les, enter change(s) he (Be specific)	<u>ere</u> :		
	7.7			
	N/A			
	1-//-		-	
				···········
f an amendment provides for an excha	ange, reclassification,	or cancellation of i	issued shares.	
provisions for implementing the amen	dment if not containe	ed in the amendmen	nt itself:	
(if not applicable, indicate N/A)				
	N/A			
	''		· · ·	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: December 9, 2015	
(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 wi document's effective date on the Department of State's records.	ll not be listed as the
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.	15 DE SE
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	15 DEC 14 AM 11: 09
Dated December 9, 2015	三點
Signature Las Daniel	_
(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)	
Dave Dannemiller	
(Typed or printed name of person signing)	
PCFO	
(Title of person signing)	