

(Re	equestor's Name)	
(Ad	ldress)	
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(Cir	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Do	ocument Number)	
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Special Instructions to	Filing Officer:	

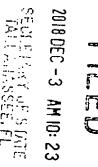
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R. WHITE DEC 0 7 2013



COVER LETTER

TO: Amendment Section Division of Corporations

> P.O. Box 6327 Tallahassee, FL 32314

or filing.
following:
of Contact Person)
rm/ Company)
(Address)
State and Zip Code)
ire annual report notification)
407 644-5885
(Area Code) (Daytime Telephone Number)
the Florida Department of State:
75 Filing Fee & S52.50 Filing Fee fied Copy Certificate of Status itional copy is Certified Copy osed) (Additional Copy is Enclosed)
Street Address
Amendment Section
i i i

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

(Same of Corporation as cu	e Dussey rrently filed with the Flor	2018 DEC - 31 AM 10: 23 10 00 00 00 00 00 00 00 00 00 00 00 00 0
70065		MELAHASSEE, FL
(Document N	umber of Corporation (if ki	nown)
fursuant to the provisions of section 617,1006, Florida St mendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
. If amending name, enter the new name of the corp.	oration:	
		The new
name must be distinguishable and contain the word "corp Company" or "Co." may not be used in the name.	poration" or "incorporated	U or the abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable:		
Principal office address <u>MUST BE A STREET ADDRI</u>	<u>ESS</u>)	
	· · · · · · · · · · · · · · · · · · ·	
		
Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
 If amending the registered agent and/or registered new registered agent and/or the new registered off 		enter the name of the
Name of New Registered Agent:		
Sume of New Registerett Agent.		
		orida strvet address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register	ered Agent:	
hereby accept the appointment as registered agent. Ta		the obligations of the position.
	Signature of Many Region	the of the set it also mainer

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 X Remove X Add	PT John D Y Mike Jo SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
X Change	p	Richard Baldwin	1550 Dale Ave
Add			Winter Park, FL 32789
Remove			
2) Change	v	Elizabeth Smith	5074 Fenwood Lane
x Add			Orlando, FL 32814
Remove			
3) Change	<u>p</u>	Kimber Saint-Preux	
Add			
X Remove			
4) Change	s	Kristine Miller	7082 Spring Park Drive
X Add			Winter Garden, FL 34787
Remove			
51 Change			
Add			
Remove			
6) Change			
Add Remove			

If amending or adding additional sheets, if need	rssary). (Be specific	")			
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	<u> </u>	<u>.</u>		<u>-</u>	
					

The date of each amendment(s) adoption:	If other than th
late this document was signed.	
Effective date <u>if applicable</u> :	
(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 v document's effective date on the Department of State's records.	vill not be fisted as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment was/were sufficient for approval.	(s)
☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Dated	
Signature Elizabeta P Smith	
(By the chairman or vice chairman of the board, president or other officer-if director	
have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Moyeshea R. Demar ELIZABETH P. SMITH	-
(Typed or printed name of person signing)	
Vice President	-
(Title of person signing)	