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SECRETARY OF STATE DIVISION OF CORPORATIONS

14 DEC -4 MM 8: 27

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COVER LETTER

TO: Amendment Section Division of Corporations DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: \$52.50 Filing Fee □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee &

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Certificate of Status

Street Address

Certified Copy (Additional copy is

enclosed)

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Certificate of Status

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Page 1 of 4

Signature of New Registered Agent, if changing

16

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	<u>V</u> <u>Mik</u>	<u>1 Doe</u> e Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if necessary).	(Be specific)			
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			<u>.</u> .	<u></u>
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	date of each amendment(s) ac	loption:	, if other than t	he
date	this document was signed.		FILLU ecopetary OF STATE	
Effe	ctive date <u>if applicable</u> :	11-30-14	SECRETARY OF STATE DIVISION OF CORPORATIONS	
	(no more than 90 days after amendment file date)	14 DEC -4 AM 8: 27		
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)		
	The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the number of votes cast for that.	e amendment(s)	
Ø	There are no members or members adopted by the board of director	pers entitled to vote on the amendment(s). The amendmen	t(s) was/were	
	Dated Signature	1/-30.14 wes & Hatching		
		man or rice chairman of the board, president or other office		
		en selected, by an incorporator – if in the hands of a receiv appointed fiduciary by that fiduciary)	er, trustee, or	
	Har	vey J. Hutchinson Jr. (Typed or printed name of person signing)		
	fres	ident of Board of Direc	tors	