770097

| · (Re | equestor's Name) | |
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| (Ac | ddress) | |
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| PICK-UP | ☐ WAIT | MAIL. |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

TO: Amendment Section **Division of Corporations**

| NALITH, INC | |
|---|--|
| DOCUMENT NUMBER: 770097 | |
| The enclosed Articles of Amendment and fee are submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | |
| MICHAEL D. TUCKER | |
| 312 E. SOUTHEY AVENUE | |
| Address ALTOONA, PA 16602 | |
| MVEGAN@AOL.COM | |
| E-mail address: (to be used for future annual report notificat | ion) |
| For further information concerning this matter, please call: | |
| MICHAEL D. TUCKER at (305) 98 | |
| Name of Contact Person Area Code & Day | ytime Telephone Number |
| Enclosed is a check for the following amount made payable to the Florida Department o | f State: |
| Certificate of Status Certified Copy Cert (Additional copy is Cert enclosed) (Add | .50 Filing Fee ificate of Status ified Copy ditional Copy nclosed) |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations | ction |

P.O. Box 6327 Taliahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



August 10, 2018

MICHAEL D. TUCKER 312 E. SOUTHEY AVENUE ALTOONA, PA 16602

SUBJECT: NALITH, INC. Ref. Number: 770097

We have received your document for NALITH, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 218A00016549

Articles of Amendment to Articles of Incorporation of

| 450 | 3/18/2/0 | |
|---------|---|------|
| (State) | Sign of the state | 3.0, |

| NALITH, INC. | | 10 mm 1 m |
|--|---|---|
| (Name of Cornoration as c | urrently filed with the Florid | Dept. of State) |
| 770097 | | Ontic. |
| (Document | Number of Corporation (if known | wn) |
| Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation: | Statules, this <i>Florida Not For I</i> | Profit Corporation adopts the following |
| A. If amending name, enter the new name of the cor | poration: | |
| | | The new |
| name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name. | orporation" or "incorporated" | or the abbreviation "Corp." or "Inc." |
| B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADD)</u> | | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX | ý | |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered of | | iter the name of the |
| Name of New Registered Agent: | | |
| New Registered Office Address: | (Flori | da street address) |
| | | |
| | (City) | , Florida (/Iip Code) |
| New Registered Agent's Signature, if changing Registered agent. I | stered Agent: | |
| | Signature of New Register | ed 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 X_Remove X_Add | <u>PT</u> <u>V</u> <u>SV</u> | John Doe Mike Jones Sally Smith | |
|----------------------------------|------------------------------------|---------------------------------------|---------------------|
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | VP | JEFF TUCKER | 12973 SW 112 STREET |
| Add | | | #267 |
| X Remove | | | MIAMI, FL 33186 |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | _ | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| L. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) | | | | | | | | | |
|--|---------------|---------------------------------------|----------|-------------|---------------------------------------|-------------|----------|--|-------------|
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|--------------------------|---|---|---|
| The date of each | amendment(s) ad | option: | , if other than the |
| late this documer | nt was signed. | | |
| Effective date <u>if</u> | applicable: | 4.1.18 | |
| | | (no more than 90 days after amendment fil | le date) |
| | | ek does not meet the applicable statutory filing repartment of State's records. | quirements, this date will not be listed as the |
| Adoption of Am | endment(s) | (CHECK ONE) | |
| | nent(s) was/were ad fficient for approva | opted by the members and the number of votes of. | ast for the amendment(s) |
| | members or memb the board of directo | ers entitled to vote on the amendment(s). The anss. | nendment(s) was/were |
| Dat | ed9 | -4.18 | |
| Sig | nature M | what Turk | |
| | (By the chain | man or vice chairman of the board, president or o | |
| | | n selected, by an incorporator - if in the hands of | f a receiver, trustee, or |
| | other court a | ppointed fiduciary by that fiduciary) | |
| | Mi | hael Ticker (Typed or printed name of person | _ |
| | | (Typed or printed name of person | signing) |
| | | CESIDEN T | |
| | | (Title of person signing | g) |