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09/17/18--01013--003 **35.00

FILED 2018 SEP 17 PH 2: 12 SECRE TARY OF STATE TALLAHASSEE, FL

C. GOLDEN SEP 2 0 Z018

COVER LETTER

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: <u>BAHLAR</u> DOCUMENT NUMBER: <u>F74678</u>	y Marketing	Associates, Inc

The enclosed Articles of Amendment and fee are submitted for filing.

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Please return all correspondence concerning this matter to the following:

Gerald Watterson
Name of Contact Person .
Battery Marketing Associates
Firm/ Company
BUW. Adam St.
Address
GCKSONVILLE, PL 32204
City/ State and Zip Code
jwatterson Osunbattery.com JE-mail address: (to be used for future annual report nonfication)

For further information concerning this matter, please call:

Name of Contact Person G at (Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee

S43.75 Filing Fee & Certificate of Status

S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Incorporation IFLED at at at at at at at at at a			Articles of Amendme to	nt	FILED
Batty Maxim Association M. 2018 SEP 17 PH 2: 12 (Name of Corporation as currently filed with the Florida Dept. St State) TARY OF STATE Mill AHASSEE, FL F744078 Mill AHASSEE, FL (Document Number of Corporation (if known) Parsuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. Hamending name, enter the new name of the corporation, "company," or "incorporated" or the abbreviation "Corp., "inc.," or Co.," or the designation "Corp.," inc, "or "Co", a professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Mailing address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address: Name of New Registered Agent and/or registered office address: Name of New Registered Agent and/or the new registered office address: (City) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent;				on	FILED
International street address in Florida, enter the name of the registered agent and/or registered office address: Mane of New Registered Agent	Battery	Narketing_	Associates	Inc.	1 1 1 2:12
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation:	FTHITR	(<u>Name of Co</u> l	rporation as currently filed w	<u>ith the Florida Dept</u>	TALLAHASSEE
its Articles of Incorporation: A. <u>Hamending name, enter the new name of the corporation:</u>			(Document Number of Corpora	ntion (if known)	
			, Florida Statutes, this <i>Florida</i> ,	Profit Corporation ad	opts the following amendment(s) to
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address, if applicable: (Mailing address, if applicable: (Mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>) D. If amending the registered agent and/or registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:	A. <u>If amending nan</u>	<u>ie, enter the new name o</u>	f the corporation:		
"Corp.," "Inc.," or Čo.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>) D. If amending the registered agent and/or registered office address: <u>Name of New Registered Agent</u> (Florida street address) <u>New Registered Office Address</u> : <u>(City)</u> (Zip Code) New Registered Agent's Signature, if changing Registered Agent:					The new
(Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (Mailing address <u>MAY BF: A POST OFFICE BOX</u>) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Lip Code)	"Corp.," "Inc.," or	Co.," or the designation	"Corp," "Inc," or "Co". A		
(Mailing address MAY BE A POST OFFICE BOX)					
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new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code)					
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new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code)	D. If amonding the	registered agent and/or	registered office address in F		ne of the
(Florida street address) (Florida street address) (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:				inter the num	
New Registered Agent's Signature, if changing Registered Agent:	<u>Name of Ne</u>	w Registered Agent			
(City) (Zip Code)			(Florida street addre	ss)	
(City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:	New Registe	ered Office Address:			, Florida
<u>New Registered Agent's Signature, if changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.			(City)		(Zip Code)
<u>New Registered Agent's Signature, if changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.					
	<u>New Registered Ag</u> I hereby accept the a	ent's Signature, if chang appointment as registered	ing Registered Agent: agent. I am familiar with and	accept the obligation.	s of the position.

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Signature of New 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:

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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:

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<u>X</u> Change	<u>PT Joh</u>	n Doe	
<u>X</u> Remove	<u>V</u> <u>Mik</u>	te Jones	
<u>X</u> Add	<u>SV</u> <u>Sall</u>	<u>y Smith</u>	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	Gerald Watterson III	1964 Raley Creek Dr.W. Jacksonnille FL 32225
Add Remove			
2) Change	T	Jacqueline Williams	1310 W. ademJL Lowsmin Fr 32204
Add Remove			
3) Change Add			
Remove			
4) Change	<u> </u>		
Add			<u> </u>
5) Change			
Add			<u> </u>
6) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

Effective date if applicable: <u>UD TUFID</u> (no more than 90 days after amendment file date)
(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 will not be listed as the document's effective date on the Department of State's records.
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"
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 09-11-18
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)
Geraid Watterson Jr. (Typed or printed name of person signing)
President
(Title of person signing)

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