619679

(R€	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
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JUL 28 2016 CLEWIS

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: _____UNITED SOLUTIONS COMPANY DOCUMENT NUMBER: G19679 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JAIME BROWN Name of Contact Person UNITED SOLUTIONS COMPANY Firm/ Company 1585 SUMMIT LAKE DRIVE Address TALLAHASSEE, FL 32317 City/ State and Zip Code ACCOUNTING@UNITEDSOLUTIONS.COOP E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DENISE ZUEHLKE Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to Articles of Incorporation of

PILLE ULERLIARY OF STATE HYTSION OF CORPORATION

2016 JUL 20 PM 12: 46

UNITED SOLUTIONS COMPANY

(Name o	f Corporation as curren	tly filed with the Florida Dept. of State)
G19679		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:	
N/A		The new
	ation "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". 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
		1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 -
C. Fatanana 28 - 13 - 26 - 18		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A
D. If amending the registered agent an	d/or registered office add	dress in Florida, enter the name of the
new registered agent and/or the new	v registered office addre	<u>ss:</u>
Name of New Registered Agent	N/A	
<u></u>		
	(Florida s	treet address)
	N/A	recrudinessy
New Registered Office Address:		(City), Florida(Zip Code)
		(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Ager	ıt:
I hereby accept the appointment as regist	ered agent. I am familiai	with and accept the obligations of the position.
	O: CIV	D. C. I.A. and I.A.
	Nimiature 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:

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 <math>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.

X Change	<u>PT</u>	John Doc				
X Remove	<u>v</u>	Mike Jones				
X Add	<u>SV</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s			
1) Change	S	MARK HOLT	1585 SUMMIT LAKE DRIVE			
Add			TALLAHASSEE, FL 32317			
X Remove						
2) Change	S	SAJED KHAN	1585 SUMMIT LAKE DRIVE			
XAdd			TALLAHASSEE, FL 32317			
Remove						
3) Change						
Add						
Remove						
4) Change	`					
Add			-			
Remove			-			
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

A	lditional sheets, if n	iecessary). (Be:	specific)				
Α							
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					•		
f an ame	endment provides :	for an exchange,	reclassificatio	n, or cancella	tion of issued sh	iares,	
provision	ns for implementi	ng the amendme	nt if not contai	ned in the am	endment itself:		
	ot applicable, indic	cate N/A)					
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<u> </u>	1,000						
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The date of each amendment(s) ad	loption:	if other than th	ıe
date this document was signed.		HECRETARY OF STATE	
Effective date if applicable:			
	(no more than 90 days after amendment file date)	2016 JUL 20 PM 12: 46)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as th	ıe
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amend flicient for approval.	lment(s)	
	proved by the shareholders through voting groups. The following stack 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 add action was not required.	opted by the board of directors without shareholder action and shareholder	reholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	der	
JULY 18, 2 Dated	2016		
	enise & Queblke		
selected	irector, president or other officer – if directors or officers have no d, by an incorporator – if in the hands of a receiver, trustee, or oth ted fiduciary by that fiduciary)		
	DENISE L. ZUEHLKE		
	(Typed or printed name of person signing)		
	VICE PRESIDENT/TREASURER		
	(Title of person signing)		