H03864

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Callenberg, Inc.	
DOCUMENT NUMBER: H03864	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this r	matter to the following:
Seth Z Joseph	
Seth Z Joseph, P.A.	Name of Contact Person
255 Alhambra Circle, #125	Firm/ Company 50
Coral Gables, FL 33134	Address
	City/ State and Zip Code
sjoseph@josephlawfirm.com E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, ple	ease call:
Seth Z Joseph	at (305 445-5383
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	le payable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & ☐\$52.50 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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Callenberg, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) H03864 (Document Number of Corporation (if known) 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: 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 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 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: (Cire) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the Signature of New Registered Agent, if changing

If amending the Officer address of each Officer	s and/or and/or D	Directors, en Director being	ter the title and name of each office added:	cer/director being removed and title, name, and
(Attach additional sheets.			autteu.	
Please note the officer/dis	rector titl	e by the first l		
P = President; V = Vice	Presideni	t: T= Treasur	er; S= Secretary; D= Director; TR=	= Trustee; C = Chairman or Clerk; CEO = Chief
				re than one title, list the first letter of each office
held. President, Treasure Changes should be noted				the PST and Mike Jones is listed as the V. There is
a changes Sumua ve notea	in the joi	ornoration Sci	er. Currently John 190e is tisled as t ally Smith is named the V and S. The	ine r'51 and witke Jones is usied as the v. There is ese should be noted as John Doe, PT as a Change,
Mike Jones, V as Remove	and Sal	ly Smith. SV a	s an Add.	se should be holed as John Die, 1 1 as a Change,
Example:				
X Change	PT	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Nar 	<u>ne</u>	<u>Addres</u> s
I) Change	T	- Uri	mella Larsson	2785 N. Commerce Parkway
Add				Miramar, FL 33025
X Remove				
2) Change	т	Jos	eph M. Allbaugh	2785 N. Commerce Parkway
XAdd				Miramar, FL 33025
Remove				
3) Change	_			
Add				
Remove				
4) Change	_			-
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				

_ Remove

If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)
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If an amendment provides for an excha	inge, reclassification, or cancellation of issued shares,
provisions for implementing the amen	dment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	<u> </u>
<u> </u>	

July 10, 2017
The date of each amendment(s) adoption:
Effective date if applicable:
(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
(voling group)
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 action was not required.
Dated8/9/2017
Signature
(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)
Michael Daniel Bornak
(Typed or printed name of person signing)
Secretary
(Title of person signing)

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