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TALL AND SECRETARY SECRETA

Mm 8/1/13

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: JRS MANA	GEMENT COM	PANY, INC.		
DOCUMENT NUMBI		· · · ·			
	f Amendment and fee are sub	omitted for filing.			
Please return all corresp	ondence concerning this mat	ter to the following:			
,	SEAN MURPHY				
-		Name of Contact Persor	1		
•	WILLIAM G MURPHY CPA, PLLC				
		Firm/ Company			
•	996 HOWARD AVENUE				
_		Address			
	BILOXI MS 39530				
_	,	City/ State and Zip Code			
BILI	_MURPHYCPA@	AOL.COM			
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	concerning this matter, pleas	e call:			
SEAN MURP	HY	_{at (} 228	284-1491		
Name o	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment of State:		
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

Articles of Amendment

FILED 1:42

	Articles of Incorporation of	13 JUL 25 PM 1: 42
JRS MANAGEMENT CO	OMPANY, INC.	SECRETARY of Shale
(Name of Corporation as	ecurrently filed with the Florida Dept. of State	TX T X T X T X T X T X X X X X X X X X
(Documen	nt Number of Corporation (if known)	,
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this Florida Profit Corpo	oration adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:	
JRS MANAGEMENT AN	ID COMPANY, INC.	_The new
	tain the word "corporation," "company," or nation "Corp," "Inc," or "Co". A professiona ttion," or the abbreviation "P.A."	
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable: TREET ADDRESS)	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		
		
D. If amending the registered agent an new registered agent and/or the ne		r the name of the
Name of New Registered Agent	CHRISTINA F. EGLINTON	
	608 S TYNDALL PARKWAY	<u> </u>
	(Florido street oddress)	20404
New Registered Office Address:	PANAMA CITY	Florida 32404
	(City)	(Zip Code)
New Registered Agent's Signature, if o	shanaine Deristand &	
I hereby accept the appointment as regis	name in Repstered Agent: refed agent. I am familiar with and accept the o	bligations of the position
	mytine Eglento	Δ
S	gnature of New Registered Agen, 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
. 2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
S) Change			
5) Change Add			
Remove			
Kemove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	No. of the Market Classical allows
provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

•

	7/17	71	12	
The date of each amendment(s) adoption:		<u> </u>	<u> 12 </u>	
Effective date if applicable:				
(no z	nore than 90 days	after a	mendmen! j	file date)
Adoption of Amendment(s) (CHECK	<u>one</u>)			
The amendment(s) was/were adopted by the shareh by the shareholders was/were sufficient for approvi	olders. The numb	er of v	otes cast for	the amendment(s)
The amendment(s) was/were approved by the share must be separately provided for each voting group	holders through vo entitled to vote se	oting g parate	roups. The , Iy on the an	following statement nendment(s):
"The number of votes cast for the amendment	(s) was/were suffic	cient fo	or approval	
by			,	1
. (voting gro	pupj			
The amendment(s) was/were adopted by the board action was not required.	of directors withou	ot shar	cholder actio	on and shareholder
The amendment(s) was/were adopted by the incorpaction was not required.	orntors without shi	er cho lo	der action an	id shareholder
Dated		,		
Signature Scene	May			
(By a director, president o selected, by an incorporat				
appointed fiduciary by the		2 Q(# 1	eceiver, mus	nee, or other come
Steve	1 Rup	P		
Стурей	or printed name of	f perse	on signing)	
_ Sec_				
(Title of person signing)				