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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

Account Name : KORN & ZEHMER, P.A.

Account Number : I20020000036

: (904)280-0005

Fax Number

: (904)280-2901

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		

COR AMND/RESTATE/CORRECT OR O/D RESIGN NCC BUSINESS SERVICES, INC.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$43.75

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Electronic Filing Menu

Corporate Filing Menu

JUN - 6 2019





June 5, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

NCC BUSINESS SERVICES, INC. 9428 BAYMEADOWS ROAD SUITE 200 JACKSONVILLE, FL 32256

SUBJECT: NCC BUSINESS SERVICES, INC.

REF: J28901

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

An individual must sign on behalf of the business entity you have designated as the registered agent.

The date of adoption of each amendment must be included in the document.

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

Claretha Golden Rogulatory Specialist II FAX Aud. #: H19000177308 Letter Number: 919A00011206

RECEIVED

MISJUN -5 PM 2: 0

MALLARY COMMAN

corrected 6/5/19

Jun. 5. 2019 11:45AM KORN & ZEHMER

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No. 1846 P.

Articles of Amendment Articles of Incorporation of

2019 JUN -5 AH 10: 27

to

NCC Business Services, Inc.			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
(Name	of Corporation as current	ly filed with the Florida D	ept. of State)	
J28901				
	(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Plorida Statutes, this	Florida Profit Corporation	adapts the following amendment(s	
A. If amending name, enter the new na	me of the corporation:			
Heldan JAX, Inc.			The new	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corp	rporated" or the abbreviation	
B. Enter new principal office address,	if anniteable.	14511 Starbuck Springs	: Way	
(Principal office address MUST BE A S		Jacksonville, Florida 32258		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST		14511 Starbuck Springs	14511 Starbuck Springs Way	
		Jacksonville, Florida 32	258	
			· 	
D. If amending the registered agent an new registered agent and/or the new			ame of the	
Name of New Registered Agent	Dublin Business Services, LLC			
	822 AlA North Suite 315	5		
	(T-lorida si	rees address)		
New Registered Office Address:	Ponte Vedra Beach		, Florida 32082	
		(Citv)	(Zip Code)	

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 position.

OORER Manager of Dublin Business Services, LLC Signature of New Registered Agent, if changing

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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)

Example:

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.

X Change	PT	John Do	£			
X Remove	<u>v</u>	Mike Jo	<u>nes</u>			
X Add	<u>sv</u>	Sally Sn	nith			
Type of Action (Check One)	Title		Name		4	<u>Addres</u> s
l) Change		_	•		_	
Add					_	
Remove					_	
2) Change		_			_	
Add					_	
Remove					_	
3) Change				-	_	
Add					_	
Remove					_	
4) Change		_		· · · <u>- · · · · · · · · · · · · · · · ·</u>		
Add	•				_	
Remove					_	
5) Chango		_			_	
Add					_	
Remove					_	
6) Change		_				
Add	<u></u>	→				
Remove						

Page 2 of 4

	heets, if necessary).	. (Be specific)	nnge(s) here:)			
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in amendment n	rovides for an exc	handa taclassi	fication or can	callation of issu	ad chorac	
<u>rovisions for imp</u>	lementing the am-	endment if not	contained in th	e amendment it	self:	
(іј посаррисац	ble, indicate N/A)					
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The date of each amendment(s) ad date this document was signed.	aptions, if other than t
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this bi document's effective date on the Dep	ook does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECKONE)
The amendment(s) was/were adop by the sharsholders was/were suf	sted by the shareholders. The number of votes cast for the amendment(s) fielent for approval.
☐ The amendment(s) washwere appr must be separately provided for a	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast f	or the amendment(s) was/were sufficient for approval
by	(yoling group)
	(voling group)
The amendment(s) was/were adopaction was not required.	sted by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopation was not required.	ted by the incorporators without shareholder action and shareholder
Dated June	4,2019
Signature <u>f</u>	ROV
(By aldir solocied,	ector, president or other officer — if directors or officers have not been by an incorporator — if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
	Fruing Pollen
-	(Typed or printed name of person signing)
	President
-	(Title of person signing)