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Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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COR AMND/RESTATE/CORRECT OR O/D RESIGN CREATIVE BODY WORKS, INC. OF PINELLAS

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Help

JUL 1 0 2014

C. CARROTHERS

7/9/2015

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Articles of Amendment to Articles of Incorporation

| Articles of Incorporation of | |
|---|--------------------|
| CREATIVE BODY WORKS, INC. OF PINELLAS | ,;1°, |
| (Name of Corporation as currently filed with the Florida Dept. of State) | |
| K04059 | ij |
| (Document Number of Corporation (if known) | , |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following arits Articles of Incorporation: | iendme |
| A. Hamending name, enter the new name of the corporation: | |
| CREATIVE PROPERTIES OF PINELLAS INC. | e nevi |
| name must be 'distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation," "inc.," or Co.," or the designation "Corp.," "inc.," or "Co". A professional corporation name must conword "chartered," "professional association," or the abbreviation "P.A." | viation aln the |
| 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:, Florida, Florida | |
| (City) (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. | |
| | |
| | |
| 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:

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 1 | ohn Dog | | | | |
|-------------------------------|----------------|-------------|---------------------------------------|---------|---------------------------------------|------------------------------|
| X Remove | Δ 7 | vike Jones | · · | | | |
| _X Add | SV Sally Smith | | | | | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | | Address | | |
| 1)Change | - | | | | | _ |
| Add | | | | | | _ |
| Remove | | | | | | - |
| ; | | | | | | |
| 2)Change | | | · · · · · · · · · · · · · · · · · · · | | | - : - |
| Add | | | | | | ' |
| Remove | | | | | | |
| 3) Change | | | | | | <u>-</u> ;, _ <u></u> (` * · |
| Add | | | | • | | - . |
| Remove | | | | | | - |
| 4) Change | | | | | | _ |
| Add | | | | | | _ |
| Remove | | | | | · · · · · · · · · · · · · · · · · · · | |
| | | | | | | |
| 5)Change | | | | | | _ |
| Add | | | • | | | • |
| Remove | | | | | | - |
| 6) Change | | <u> </u> | | | | _ |
| Add | | | - | | | _ |
| Parroya | | | | | | - |

| E. <u> [amendl</u> | ne or adding additional Articles, enter change(s) here: |
|--------------------|--|
| (Attach ad | ditional sheets, if necessary). (Be specific) |
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| F. <u>Ifan ame</u> | ndment provides for an exchange, reclassification, or cancellation of issued shares, is for implementing the amendment if not contained in the amendment itself: |
| (if no | or applicable, indicate N/A) |
| | |
| | |
| | |
| <u> </u> | |
| | |
| | |
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| | |

| The date of each amendment(s) adoption: | , if other than the |
|--|--|
| date this decument was signed. | |
| Effective date if applicable: | |
| (no more than 90 days after an | rendment file date) |
| Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records. | filing requirements, this date will not be listed as the |
| Adoption of Amondment(s) (CHECK ONE) | |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of voice by the shareholders was/were sufficient for approval. | es east for the amendment(s) |
| The amendment(s) was/were approved by the shareholders through voting gromust be separately provided for each voting group entitled to vote separately | oups. The following statement on the amendment(s): |
| "The number of votes east for the amendment(s) was/were sufficient for | *** |
| by | Н . |
| (voting group) | |
| ☐ The amendment(s) was/were adopted by the board of directors without sharch action was not required. | older action and shareholder |
| The amendment(s) was/were adopted by the incorporators without shareholde action was not required. | raction and shareholder |
| July 7, 2015 | • |
| Dated | · • |
| Signature | |
| (By a director, president or other officer — if director selected, by an incorporator — if in the hands of a recappointed fiduciary by that fiduciary) | |
| Mary Balloy | |
| (Typed or printed name of person | signing) |
| Incorporator/Secretary | |
| (Titio of person sign) | 16) |