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S. YOUNG

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COVER LETTER

TO: Amendment Section Division of Corporations

; -

NAME OF CORPOR	RATION: HAMKER ENTER	RPRISES CORPORATION	<u> </u>	
DOCUMENT NUME	BER: K11412			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	CANDY BROWNLOW			
	Name of Contact Person			
	JOHN P. MAAS Attorney at Law			
	·	Firm/ Company		
	44 NE 16 STREET			
	Address			
	HOMESTEAD, FL 33030			
		City/ State and Zip Cod	e	
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
CANDY BROWNLOW		at (247-7132	
Name o	Name of Contact Person Area Code & Daytime Telephone ?		de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:	
S35 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)	
Ame Divi	ling Address endment Section sion of Corporations Box 6327	Amend Divisio	Address Iment Section on of Corporations Building	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, Fl. 32314

Articles of Amendment

to

Articles of Incorporation

οf

HAMKER ENTERPRISES CORPORATION

(<u>Name</u>	of Corporation as current	tly filed with the Florida Dept. of Stat	<u>e</u>)
	K1	1412	
	(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		77
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corporation nam	
. B. Enter new principal office address, if applicable:		N/A	
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		
		- 100	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
			A 8
D. If amending the registered agent an new registered agent and/or the ne			
Name of New Registered Agent	N/A		
	(Florida si	treet address)	. <u>S</u> 8
New Registered Office Address:	N/A	, Florida	
		(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regis.			osition.
	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.

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>	<u>Name</u>	<u>Addres</u> s
.1) Change	<u>s</u>	LEONARD H. HAMKER	520 NW 9th AVENUE
AddX Remove			HOMESTEAD, FL 33030
2) X Change	PS	JOSEPH H. HAMKER	520 NW 9th AVENUE
Add			HOMESTEAD, FL 33030
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	cles, enter change(s) here:
	(ne specific)
N/A	
-	
· · · · · · · · · · · · · · · · · · ·	
F. If an amendment provides for an exch	range, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	
	711-14-48

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	t(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s):	neni
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	der
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated Sopt 11	
Signature By a director, president or other officer – if directors or officers have not been	
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 co appointed fiduciary by that fiduciary)	n urt
JOSEPH H. HAMKER	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	