## K58065

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	ION: Sandy Hook, Inc.			
DOCUMENT NUMBER				
The enclosed Articles of A		bmitted for filing.		
Please return all correspon	dence concerning this ma	tter to the following:		
Tin	nothy J. Bruehl, Esq.			
<del></del>		Name of Contact Pers	on	
Wa	ggoner & Bruehl, P.A.			
		Firm/ Company		
540	0 Pine Island Rd., Suite I	)		
		Address		
Bol	ceelia, FL 33922			
		City/ State and Zip Co	ode	
brlauber@	@comcast.net			
		sed for future annual repo	rt notification)	
For further information co	ncerning this matter, pleas	se call:		
Timothy J. Bruehl, Esq.		at ( 239	283-1076	
Timothy J. Bruehl. Esq. at (239 ) 283-1076  Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the	following amount made	payable to the Florida De	partment 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)	
	Address		et Address	
	nent Section		ndment Section	
	Division of Corporations  Division of Corporations  Division of Corporations			
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Sandy Hook, Inc.				
(Name o	of Corporation as currently	filed with the Florida Dep	t. of State)	
K58065				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006. Florida Statutes, this I	Florida Profit Corporation ac	dopts the fo	ollowing amendment(s) to
A. If amending name, enter the new na	ime of the corporation:			
N/A				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp." "Inc." or "C	20". A professional corpore		the abbreviation
D. Patrician indicate address.	icanutina ktan	N/A		
B. Enter new principal office address, (Principal office address MUST BE A S				
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A		
			· · · · ·	
D. If amending the registered agent an	id/or registered office addre	ess in Florida, enter the nar	ne of the	
new registered agent and/or the new	w registered office address:			
Name of New Registered Agent	N/A			
	(Florida stre	et address)		<del> </del>
New Registered Office Address:	N/A		. Florida	
		City)	.,	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accept the obligation	s of the po	sit <b>iou</b> .
, , ,	•			
			A	
	Ciman CAI II	and the second to the second	<u> </u>	
	Signature of New Re	egistered Agent, if changing		
			ال المالية المالية	T 🚑

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	Nicole McQuade	12291 Shoreview Dr.
X Add			Matlacha, FL 33993
Remove			
2) Change		_	
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<del>-</del>	
Add			
Remove			<del></del>
6) Change			
Add	<del></del>	-	
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
	<del></del>
	_
<del></del>	
· · · · · · · · · · · · · · · · · · ·	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
N/A	

	N/A ,	
The date of each amendment(s	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	1/A	
Energy date it apprearage.	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirem Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the sufficient for approval.	amendment(s)
	approved by the shareholders through voting groups. The follo for each voting group entitled to vote separately on the amenda	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
bv	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action an	d shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder action	areholder
Dated	7/13/17	
Signature	Timb McQuade	
	a director, president or other officer — if directors or officers ha cted, by an incorporator — if in the hands of a receiver, trustee,	
	pinted fiduciary by that fiduciary)	of other court
-11		
	Nicole McQuade	
	(Typed or printed name of person signing)	
	Manager	
	(Title of person signing)	