K 68 159

(Re	equestor's Name)			
(Ad	ddress)			
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C. GOLDEN FEB 21 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	GENTLEMEN'S	QUARTERS OF KISSIMM	IEE, INC.	
DOCUMENT NUMBER: K68159				
The enclosed Articles of	of Amendment and fee are si	abmitted for filing.		
Please return all corres	pondence concerning this ma	atter to the following:		
		SHANNON APPEL		
•	Name of Contact Person GENTLEMEN'S QUARTERS OF KISSIMMEE, INC.			
		Firm/ Company 1106 N JOHN YOUNG P		
-		Address KISSIMMEE, FL 347-	41	
-		City/ State and Zip Cod	e	
		VI@KERMALICPA.COM		
	E-mail address: (to be u.	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
SHANNON		at ()	
Name o	f Contact Person	Area Co)de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	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)	
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle ussee, FL 32301	

Articles of Amendment to

Articles of Incorporation of

FILL

4:41

GEN"	LEMEN'S QUARTERS OF KISSIMMEE, INC.	2016 FFD 20 FH 4: 4
(Name	of Corporation as currently filed with the Florid:	a Dept. of State)
	K68159	
	(Document Number of Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006. Florida Statutes, this Florida Profit Corpora	tion adopts the following amendment(s) to
A. If amending name, enter the new na	ime of the corporation:	
name must be distinguishable and con "Corp" "Inc.," or Co" or the design word "chartered." "professional associa	tain the word "corporation," "company," or "it ation "Corp," "Inc," or "Co". A professional co tion," or the abbreviation "P.A."	The new necorporated" or the abbreviation orporation name must contain the
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable: TREET ADDRESS)	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of	cable: OFFICE BOX)	
D. If amending the registered agent an new registered agent and/or the new	d/or registered office address in Florida, enter the	e name of the
Name of New Registered Agent	M KERMALI CPA PA	
	405 WAYMONT CT, STE #121	
New Registered Office Address:	(Florida street address) LAKE MARY	32746 , Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as regist	nanging Registered Agent: ered agent. I am familiar with and accept the oblig	vations of the position.

Page 1 of 4

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	PT	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	Address
1) Change	Р	SHANNON APPEL	H W NEW HAMPSHIRE ST
X Add			ORLANDO, FL 32804
Remove			
2) Change	DV	ALLEN APPEL	8235 DIAMOND COVE CIR
Add			ORLANDO, FL 32836
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	_		 .
Pemova			

mach additional sheets, if necessary).	(Be specific)				
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an amendment provides for an excl	hange, reclassifi	cation, or canc	ellation of issu	ed shares,	
orovisions for implementing the ame (if not applicable, indicate N/A)	endment if not co	ontained in the	amendment i	tself:	
(y noi applicable, matcate WA)					
				_	
		-			
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	-	-			
			<u>,</u> _		-
	_				

The date of each amendment(s) adoption: date this document was signed.	if other than the
Effective date if applicable:	
(no more than 90 days after amend	lment file date)
Note: If the date inserted in this block does not meet the applicable statutory filir document's effective date on the Department of State's records.	ng requirements, this 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 of by the shareholders was/were sufficient for approval.	east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups must be separately provided for each voting group entitled to vote separately on	s. The following statement the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for app	oroval
by(voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholde action was not required.	er action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder act action was not required.	tion and shareholder
Dated 2/12/18	
Signature NW NUVOTA	
(By a director, president or other officer – if directors or selected, by an incorporator – if in the hands of a receive appointed fiduciary by that fiduciary)	
SHANNON APPEL	
(Typed or printed name of person sign	ning)
PRESIDENT	
(Title of person signing)	
