L 68573

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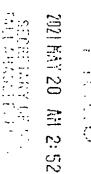
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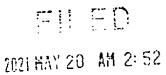
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TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: Kelley & Rowan, l	Inc II	
DOCUMENT NUM	BER: <u>1.68573</u>	<u></u> .	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Jennifer Mauk	N 60	
		Name of Contact Persor	
	Keffey & Rowan, Inc II	Firm/ Company	
		Time Company	
	8310 SW 171 Street	Address	
		Address	
	Palmetto Bay, Fl 33157	City/ State and Zip Code	,
		City State and Esp Code	•
	jennmauk@gmail.com F-mail.address: (to be us	sed for future annual report	notification)
	17 man add epp. (10 oc m		,
For further information	on concerning this matter, pleas	se call:	
Jennifer Mauk		at (208) 724-487
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check f	or 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



Kelley & Rowan, Inc II

(Name of Corporation as currently filed with the Florida Dept. of State) s) to

1.68573	GALLES STATE OF THE
	of Corporation (if known)
ursuant to the provisions of section 607,1006. Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amenda
. If amending name, enter the new name of the corporation:	
KA	The ne
ine must be distinguishable and contain the word "corporation," Inc.," or Co.," or the designation "Corp," "Inc," or "Co", Thartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the wor
Enter new principal office address, if applicable:	NA
rincipal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
Chang and Carlotte Control of the Co	
 If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre 	
	_
Name of New Registered Agent NA	110
(Florida s	street address;
New Registered Office Address: NA	, Florida
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registered Agen	
hereby accept the appointment as registered agent. I am familia	r with and accept the obligations of the position.
Signature at New	Registered Agent, if changing
Signature of New	negative a agent, if entire ing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	<u>PT</u>	John Doe	
X Remove	V	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change	<u>VP</u>	Jennifer Mauk	3666 W Bush Ln
\underline{X} Add			Boise, ld 83703
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5/ Change			
Add			, <u> </u>
Remove			
6) Change		<u> </u>	
Add			
Remove			

Attach additie	or adding additional mal sheets, if necessa	ry). (Be specific	9			
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	nent provides for an or implementing the					
(if not ap	oplicable, indicate N/,	4)			_	
	· · ·					

The date of each amendment(s) a	doption:	, 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 bedocument's effective date on the De	block does not meet the applicable statutory filing requirements apartment of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors without shareho	lder action and shareholder
☐ The amendment(s) was/were ad- by the shareholders was/were so	opted by the shareholders. The number of votes cast for the ame afficient for approval.	ndment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selecte	irector, president or other officer – if directors or officers have n d, by an incorporator – if in the hands of a receiver, trustee, or of ted fiduciary by that fiduciary)	
	Denis J Rowan (Typed or printed name of person signing)	
	(Typed of printed name of person signing)	
	DP	
	(Title of person signing)	