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R. WHITE NOV 3 0 2018 SECRETARY OF STATE TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: C. BAERSKI COR	RPORATION		•
DOCUMENT NUMI				
	of Amendment and fee are su	abmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Daniel W. Price			
		Name of Contact Person	<u> </u>	
	C. Baerski Corporatiom			
		Firm/ Company	-	
	P. O. Box 214066			
		Address		
	South Daytona, Fl 32121-40	066		
		City/ State and Zip Cod	e	
hiris ∉	man1@gmail.com			
	= =	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas		846 8818	
		at (386	_) 846-8818	
Name	of Contact Person	Area Co	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)	
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301	

Articles of Amendment to Articles of Incorporation of

FILED

/Nama	of Composition as automatic fi	Lod with the Florida Dart of State
		SECRETARY OF STATE
C. BAERSKI CORPORATION	Document # L88750	SECRETARY OF STATE TALLAHASSEE, FI
	(Document Number of Co	orporation (if known)
Pursuant to the provisions of section 607 ts Articles of Incorporation:	.1006, Florida Statutes, this <i>Flo</i>	rida Profit Corporation adopts the following amendm
A. If amending name, enter the new n	ame of the corporation:	·
	nation "Corp," "Inc," or "Co"	The ne "company," or "incorporated" or the abbreviatio ". A professional corporation name must contain th
B. <u>Enter new principal office address,</u> Principal office address <u>MUST BE A S</u>		
C. Enter new mailing address, if appl		
(Mailing address <u>MAY BE A POST</u>	<u>OFFICE BOX</u>) -	
O. If amending the registered agent an new registered agent and/or the ne		in Florida, enter the name of the
Name of New Registered Agent		<u> </u>
	1	
	(Florida street o	address)
New Registered Office Address:		Florida
	(Cit	(Zip Code)
		•
New Registered Agent's Signature, if a hereby accept the appointment as regis		and accept the obligations of the position.
nerecy accept me appointment as regio	icrea agem. Tempamian min	in accept the congunities of the position.
		•
	Signature of New Regis	stered 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>	Address
1) Change	D	Price, William	4557 Kalua Drive
Add x Remove			Indian River, MI 49749
2) Change Add			
Remove 3) Change Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			

E. <u>If amending or adding additional</u> (Attach additional sheets, if necessor	Articles, enter change	e(s) here:			
(Attach additional sneets, if necessar	иуј. (Бе ѕресіјіс)				
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			-		
		· ·			
. If an amendment provides for an	exchange, reclassifica	tion, or cancellation	of issued shares,		
provisions for implementing the	amendment if not con	tained in the amend	ment itself:		
(if not applicable, indicate N/	A)				
					
				•	
					
					<u> </u>
					· · ·
·	 -			$\overline{}$	

The date of each amendment(s) adop	tion:	, if other than the
date this document was signed.		÷.
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depar	k does not meet the applicable statutory filing requirements, this date tment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders was/were suffice.	d by the shareholders. The number of votes cast for the amendment(s) ient for approval.	ı
	red by the shareholders through voting groups. The following statement ch voting group entitled to vote separately on the amendment(s):	ıt .
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	.,,	
	(voting group)	
The amendment(s) was/were adopted action was not required.	d by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted action was not required.	d by the incorporators without shareholder action and shareholder	
Dated 11/20	7/18	•
Signature	Jand W. Pino	·
(By a direction) (By a direction), but the selection is a selection of the selection is a selection of the s	etor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	
	Daniel W. Price	
	(Typed or printed name of person signing)	
	Director	
_	(Title of person signing)	