

NO5000008622

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

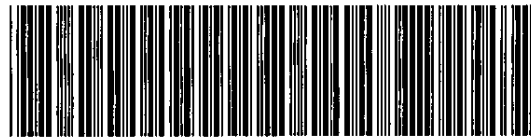
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Spoke with Travis Neff on 5/16/17
to clarify officer / Director Information.
He approved to draw lines through
existing officers.

ST

Office Use Only



300298813463

05/08/17--01014--024 **35.00

S TALLENT

MAY 16 2017

Amend

FILED
MAY -8 PM 12:26
TALLAHASSEE, FLORIDA

CRYSTAL PARROT, INC.

To: Florida Department of State
Amendment Section
Division of Corporations

4 May 2017

Name of Corporation: Crystal Parrot, Inc.

Document # N05000008622

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to:

Crystal Parrot, Inc.

c/o Sandra Riley, Registered Agent

6501 SW 62nd Court

Miami, FL 33143

crystalparrotorg@gmail.com ✓

For further information concerning this matter, please call Travis Neff at
305-519-5510.

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Thank you.

Articles of Amendment
to
Articles of Incorporation
of

CRYSTAL PARROT, INC.

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

NO5000008622

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

N/A

N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action
(Check One)

Title

Name

Address

1) ☐ Change

~~D~~ Riley, Sandra

☐ Add

☐ Remove

2) ☐ Change

~~D~~ Black, Luisa

☐ Add

☐ Remove

3) ☐ Change

~~PD~~ Brown, TL

☐ Add

☐ Remove

4) ☐ Change

STD Cuzzocrea, Laverne

☐ Add

☒ Remove

5) ☐ Change

~~VD~~ Hall, Peggy C.

☐ Add

☐ Remove

6) ☐ Change

TD Heller, Sylvia

☒ Add

☐ Remove

6501 SW 62 CT
MIAMI FL
33143

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.

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Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action
(Check One)

Title

Name

Address

7) <input type="checkbox"/> Change	<u>D</u>	<u>Henry, Lavongia</u>	<u>20350 Belaire Dr</u>
<input checked="" type="checkbox"/> Add			<u>Cutler Bay, FL</u>
<input type="checkbox"/> Remove			<u>33188</u>

8) <input type="checkbox"/> Change	<u>D</u>	<u>Lopez, Maryellen C.</u>	
<input type="checkbox"/> Add			
<input checked="" type="checkbox"/> Remove			

9) <input type="checkbox"/> Change	<u>D</u>	<u>Lopez, Michael</u>	
<input type="checkbox"/> Add			
<input checked="" type="checkbox"/> Remove			

10) <input type="checkbox"/> Change	<u>DS</u>	<u>Neff, Travis</u>	
<input checked="" type="checkbox"/> Add			
<input type="checkbox"/> Remove			

11) <input type="checkbox"/> Change	<u>D</u>	<u>Soliday, John</u>	
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

12) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

N/A

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 date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 18 APRIL 2017

Signature Sandra Riley
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Sandra Riley
(Typed or printed name of person signing)

Registered Agent, Director
(Title of person signing)