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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

TB

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COVER LETTER

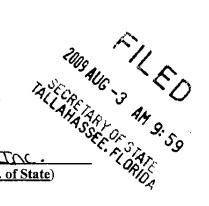
TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF C	ORPOR.	ATION South F	anda Ambush.F	astpatch, Inc
DOCUMENT	r numbi	er: <u>N 090000</u>	05093	
The enclosed.	Articles o	f Amendment and fee are	submitted for filing.	
Please return a	all corresp	ondence concerning this r	natter to the following:	
	Jan	nes Stratter		· .
		(Name	of Contact Person).	
·	Sa	th Florida (F	Andrush Fostprirm/Company)	tch, Inc
		1144 NM 24	Place (Address)	
		pe Coral, Fl 3	5993 State and Zip Code)	
	<u> 201</u>	HFlorida and E-mail address: (to be	used for future annual report no	tification)
For further inf	formation	concerning this matter, ple	ease call:	
James	(Name of	Contact Person)	at (<u>OSA</u>) <u>OV</u> (Area Code & D	aytime Telephone Number)
Enclosed is a	check for		e payable to the Florida Depart	
□\$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)
	Amendr	Address nent Section n of Corporations x 6327	Street Address Amendment Sect Division of Corpo Clifton Building	ion

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of



South Flanda Ambush	Fortatteh. Inc.	, , , , , , , , , , , , , , , ,
(Name of Corporation as currently filed w		
N 09000005093		
(Document Number of Corp	poration (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:

The new name must be distinguishable and contain the worabbreviation "Corp." or "Inc." "Company" or "Co." may n	•
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	1144 Now 5th Flace Cape Comp. F1 33993
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1144 NW 5th Place Cape Coral, Fl 33993
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a	

Name of New Registered Agent:

New Registered Office Address:

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.

Signalure of New Registered Agent, if changing

Page 1 of 3

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>v6</u>	Ves Swift	1712 NE 10th Fre	☐ Add S PRemove
	Robecca Swift	1715 WE 10th Are Cope Coral, FI 33909	_ ☐ Add _ M Remove
			Add Remove
	nding or adding additional Articles, en additional sheets, if necessary). (Be sp		

The date of each amendment(s) adoption: 7 80
Effective date if applicable: (date of adoption is required)
(no more than 90 days after amendment file date)
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.
Signature (By the chalman 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, of other court appointed fiduciary by that fiduciary)
Typed or printed name of person signing)
Hesidart (Title of comme signing)
(Title of person signing)