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Amend Thurs 10-16-09

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: JUST F	atriols Inc			
DOCUMENT NUMBER:N0900	0005124			
The enclosed Articles of Amendment and fee are subm	itted for filing.			
Please return all correspondence concerning this matter	to the following:			
Brendy L (Name of C	John Stor ontact Person)	<u> </u>		
<u>united</u> Ame	Prican Tea P Company)	arty		
1960 US HWG	1 South #	96		
St Augustin	ne, FL. 320 and Zip Code)	<u> </u>		
BJKraZy	e Yah 00 Cen	V		
For further information concerning this matter, please call:				
Bree Lee Johnston (Name of Contact Person)	at (904) 401-	7040		
,	,	•		
Enclosed is a check for the following amount made pay	able to the Florida Department of	State:		
\$35 Filing Fee \$\ \tag{S43.75 Filing Fee & Certificate of Status}	State 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	☐ \$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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301	rcle		

Articles of Amendment

to

À:

A	rticles of Incorporation	FILÉ
	of	
<u>JUST</u>	Patriots, Inc.	7009 OCT 15 -
(Name of Corporation as cu	irrently filed with the Florida Dept. of	State) SECO
NC	900000504	TALLAHASST OF S
(Document N	Patriots, Inc. parrently filed with the Florida Dept. of: 900005124 Number of Corporation (if known)	
ursuant to the provisions of section 617.10 e following amendment(s) to its Articles o		Profit Corporation adop
. If amending name, enter the new name	e of the corporation:	
he new name must be distinguishable and bbreviation "Corp." or "Inc." <u>"Company</u>		
. Enter new principal office address, if a Principal office address MUST BE A STR		
. Enter new mailing address, if applical		
(Mailing address MAY BE A POST OF		
		
If amending the registered agent and/o	or registered office address in Florida. e	enter the name of the
new registered agent and/or the new re		
Name of New Registered Agent:		
Traine of the August Co. Tagere.		·····
New Registered Office Address:	(Florida street address)	
		m
	(City)	, Florida (Zip Code)
	(Chy)	(zip code)

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)

D Paul Hendricks	<u>Title</u>	Name	<u>Address</u>	Type of Action
D Johnnie Smith Add Remove E. If amending or adding additional Articles, enter change(s) here:	D	Paul Hendricks		
E. If amending or adding additional Articles, enter change(s) here:	D			
	D	Johnnie Smith		
				Remove
(anach adamona sneets, y necessary). (be specific)				
	(anach a	idainonai sneeis, ij necessary). (Be specij	<u>.</u>	
				
	,			
				
· · · · · · · · · · · · · · · · · · ·				
				·

The date of each amendment(s) ad	option:9-3-09
Effective date if applicable:	9-3 date of Apption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado was/w.crc sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)
There are no members or members adopted by the bound of directors	ers entitled to vote on the amendment(s). The amendment(s) was/were
Dated	13-09
Signature	Sood & Shall
have not l	airman or vice chairman of the beard, proclem or other officer-if directs reen selected, by an incorporator – if in the hands of a receiver, trustee, tappointed fiduciary by that fiduciary)
	Brenda L Johnston
	(Typed or printed name of person signing) Presidon+
	(Title of person dyning)