

(RE	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phone #	
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Name)	
(, , , , , , , , , , , , , , , , ,	
<u></u>	ocument Number)	
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THE CALLASSET FLOATION

OCT 23 2017

R. WELTS

COVER LETTER

TO:	Amendment Section
	Division of Corporations

NAME OF CORPORA	TION: 100 FT	eccom Unur	in of Jackson ville, the
DOCUMENT NUMBE	r: <u>N1000005</u> C) 	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
-	Lauren	A. Carroll Name of Contact Person	n
_	The Freed	Firm/ Company	th of JackSonville
تا خ	5454 Arlin	acton Expr	rssway
_	Jacksony	City/ State and Zip Cod	225)
ody	E-mail address: (to be us	Sed for future annual report	mchrm jax.org
For further information c	oncerning this matter, pleas	se call:	
Louven A.	Contact Person	at (<u>QO4</u> Area Co	de & Daytime Telephone Number
Enclosed is a check for the	he following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailin	o Address	Street	Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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Articles of Amendment

Articles of Am	17 OCT 19 AM 9:58
Articles of Inco	poration [7 UC1 13 AII 3 30
of	ASRCRETARY DESTREE
The Fooden Phil	THE PARTY SEE FEMALIA INC.
(Name of Corporation as currently	filed with the Florida Dept. of State)
(Document Number of C	Corporation (if known)
(1700 union 1700)	corporation (ii kiivan)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	4.
	NA
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
C. Pater and address from blockle	
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 addres	es in Florida, enter the name of the
new registered agent and/or the new registered office address:	, A
Name of Nov. Bosinson, J. Come	J/A
Name of New Registered Agent	<u> </u>
	
(Florida stree	
New Registered Office Address: (C	. Florida
(0	ity) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar wit	th and accept the obligations of the position
The state of the s	

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: 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)	Title	<u>Name</u>	Address
1) X Change	5	Corroll, Lauren A.	9536 Princeton SaBlvg3 Apt. 211
Add			Jacksonville, FL 32256
2) Change	\sqrt{g}	Thomas, Bishop Leafric	2763 Dunn AVE#1
Add Remove			Jacksonville, FL 32218
3) Change	<u>5</u>	Johnson, Christan	108 S. Courthouse Rd. Apt. 2096
Add Remove			Arlington, VA 22204
4)Change	· 		
Add			
5) Change		<u> </u>	
Add Remove			
6)Change			
Add			<u> </u>
Remove			1

Attach additional sheets, if necessary).—(Be specij	nc)
	NIA
	
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<u> </u>	
	<u> </u>
f an amendment provides for an exchange, recla	exification, or cancellation of issued shares
provisions for implementing the amendment if n	not contained in the amendment itself:
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	MIA
(if not applicable, indicate N/A)	WIA
(if not applicable, indicate N/A)	NIA
(if not applicable, indicate N/A)	N/A
(if not applicable, indicate N/A)	WIA
(if not applicable, indicate N/A)	N/A
(if not applicable, indicate N/A)	N/A
(if not applicable, indicate N/A)	N/A
(if not applicable, indicate N/A)	WA
(if not applicable, indicate N/A)	WA
(if not applicable, indicate N/A)	W/A
(if not applicable, indicate N/A)	W/A
(if not applicable, indicate N/A)	W/A

The date of each amendment(s) adoption:, if other t date this document was signed.	han the
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 document's effective date on the Department of State's records.	i as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	I
"The number of votes cast for the amendment(s) was/were sufficient for approval	1
by	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Signature Wy a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
Scoretary (Title of person signing)	