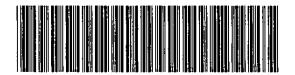
## N11000006121

(Red	questor's Name)	
(Add	dress)	
٠		
(Add	dress)	
(City	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL .
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificate	s of Status
Special Instructions to I	Filing Officer:	
		ľ

Office Use Only



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11/15/12--01014--022 \*\*35.00



Anend 11/20/12

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Epona's F	Path, Inc.	
DOCUMENT NUMBER: N11000006	121	
The enclosed Articles of Amendment and fee are sub	nitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Rita A Reik		
	(Name of Contact Person	1)
Epona's Path, Inc.		•
	(Firm/ Company)	
2858 Palm Deer Drive		
	(Address)	
Loxahatchee, Fl 33470		,
	(City/ State and Zip Cod	e)
Rareik@aol.com		
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:	
Curtis A Reik	<sub>at</sub> 561	371-7824 ode & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida Depa	artment of State:
\$35 Filing Fee \$\sum \text{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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ameno Divisio Cliftor	Address Iment Section on of Corporations Building

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

	of	7
Epona's Path, Inc.	er yê.	0
(Name of Corporation as currently filed with the F	Florida Dept. of State)	. ر
N11000006121	**************************************	
(Document Number of Corpo	oration (if known)	•
fursuant to the provisions of section 617.1006, Florida Statumendment(s) to its Articles of Incorporation:	utes, this Florida Not For Profit Corporation adopts the	follo
If amending name, enter the new name of the corpora	ation:	
N/A		The
ame must be distinguishable and contain the word "corpor	ration" or "incorporated" or the abbreviation "Corp." o	
Company" or "Co." may not be used in the name.		
Enter new principal office address, if applicable:	2858 Palm Deer Drive	
Principal office address <u>MUST BE A STREET ADDRESS</u>	S) Loxahatchee, Fl 33470	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2858 Palm Deer Drive	
	Loxahatchee, Fl 33470	
<ol> <li>If amending the registered agent and/or registered of new registered agent and/or the new registered office</li> </ol>	ffice address in Florida, enter the name of the	
Name of New Registered Agent: N/A		
lew Registered Office Address:	(Florida street address)	
(Cit)	y) , Florida, (Zip Code)	

Page 1 of 4

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 X Remove X Add	PT John Do V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	***************************************		
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			<u> </u>
4) Change	<del></del>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
(under additional sneets, if necessary). (De specific)	
Article II - Principal Office	
Change to:	
Article II - PRINCIPAL OFFICE	
The whose in Flinida infinit Harrisaina	
The place in series writer in principal	
The place in Florida where the principal office of the Corporation is to be located is in Lahahalche Horida, Palm Beach County at 2858 Palm Deer Wive, Sofahatchee, H 33470	رع
- Houda), Palm Beack County at 2858 Palm Deer	•
_ dowe, Tofahatchee, Fl 33470	
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•	
•	
· · · · · · · · · · · · · · · · · · ·	

The date of each ame	ndment(s) adoption:
Effective date if appli	(no more than 90 days after amendment file date)
Adoption of Amendm	ent(s) (CHECK ONE)
The amendment(s was/were sufficient	) was/were adopted by the members and the number of votes cast for the amendment(s) at for approval.
There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.
Dated	11-11-12
Signature	
	(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)
	Rita A. Reik
	(Typed or printed name of person signing)
	Secretary Treasurer and Registered Agent
**	(Title of person signing)