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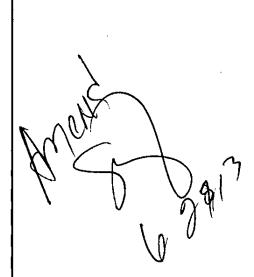
(Re	equestor's Name)	;
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## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: <u>JOE HARNE</u> DOCUMENT NUMBER: WWW.00009 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: WONNE BA (Name of Contact Person) (Firm/ Company) (Address) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed)

**Mailing Address** 

TO: Amendment Section

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

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

## Articles of Amendment to Articles of Incorporation of



JOE HAKNEY I					
(Name of Corporation as curren	ntly filed with the Fl	orida Dept. of State	)		_ •
	000992				
. (Docume	ent Number of Corpo	ration (if known)			
Pursuant to the provisions of section 617 amendment(s) to its Articles of Incorpor		tes, this <i>Florida Not</i> .	For Profit Co	rporation adopts	the following
A. If amending name, enter the new r	name of the corpora	tion:			
					The new
name must be distinguishable and conta "Company" or "Co." may not be used i		ation" or "incorpora	ted" or the ab	breviation "Corp	o." or "Inc."
B. Enter new principal office address (Principal office address <u>MUST BE A</u>	aif applicable:	. 1992	erer	<u> </u>	_ >
(Principal office address MUST BE A S	<u>STREET ADDRESS</u> 	) (			
•					
E Tuil			<del></del>		
C. Enter new mailing address, if app (Mailing address MAY BE A POST	<u>licable:</u> COFFICE BOX)		1	<u>(</u> ,	
· •		140 1 3 1 11	£ . \	1	
14 16.60 1 10					<del>-</del>
J. Moth E		•			
D. If amending the registered agent a			la, enter the 1	name of the	
new registered agent and/or the ne	1	<del></del>			
Name of New Registered Agent					
	1941 82	nbeoch D	l		
New Registered Office Address:		(Florida street address)			
	VALLIO		Flori	do FIA	
	(City,	)	, 14011 (Zi <sub>i</sub>	da <i>1/A</i> p Code) 33	541
New Registered Agent's Signature, if a I hereby accept the appointment as regis			pt the obligat	ions of the positio	n.
-4	/ Joine	Daris			
Ši	gnature of New Regi.	stered Agent, if chang	ging		
	•	Page 1 of 4			

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	<u>V</u> <u>Mi</u>	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change	P_	JOE HARNEY	4910 SERENA DE
Add	• •	J	TAMPA PA
Remove			33417.
2) Change	P	Yvanne BARNES	1961 Ex. nbeook Deve
_ <b>X</b> _Add		1	UNICO FIA
Remove		· <b>6</b>	38594
3) Change			
Add		Market Johnson	roki
Remove	•	Sankle Sank	, , , , , , , , , , , , , , , , , , ,
4) Change Add		N. 3.	
Remove	Next		
5) Change	<u></u>	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)		
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	·		

The date of each amendment(s) ado	ption: 4/1/2013
Effective date if applicable:	<i>/ /</i>
meetive date <u>in application</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado /was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)
There are no members or member adopted by the board of directors	rs entitled to vote on the amendment(s). The amendment(s) was/were s.
Dated Coff	2013
Signature ////	(Rara
	an or vice chairman of the board, president or other officer-if directors
	selected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)
llvann	e Barre
	Typed or printed name of person signing)
Henry	Sass
	Title of person signing)
//	•

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