N14000009288

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	eam Explorer, Inc.			
N140 DOCUMENT NUMBER:	00009288			
The enclosed Articles of Amendm	ent and fee are submitted	for filing.		
Please return all correspondence co	oncerning this matter to th	e following:		
Ronald J. Gauthier				
	(Nam	e of Contact Perso	son)	
Team Explorer Inc.				
	(1	Firm/ Company)		_
2714 Datura Street				
		(Address)		
Sarasota, FL 34239				
	(City/	State and Zip Coo	ode)	
E-mail	address: (to be used for fu	ture annual report	rt notification)	
For further information concerning	this matter, please call:			
Roanld J. Gauthier		at	941 376 2714	
(Nam	e of Contact Person)		Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following	ng amount made payable	to the Florida Dep	partment of State:	
	(Ad	3.75 Filing Fee & tified Copy Iditional copy is closed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Addres	s s	Street	et 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

Articles of Amendment Articles of Incorporation

TEAM EXPLORER, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) N14000009288

(Document N	umber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not</i>	For Profit Corporation adopts the fol	lowing
A. If amending name, enter the new name of the corpo	oration:		
		T	he new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "incorpor	ated" or the abbreviation "Corp." or	"Inc,"
3. Enter new principal office address, if applicable:			
Principal office address <u>MUST BE A STREET ADDRE</u>	ESS)		
		·	
. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
,			215 215
			2115 SEP 16 AM 9: 12
	OT 11 1 771 1	2 (2)	<u>e</u> .
 If amending the registered agent and/or registered new registered agent and/or the new registered offi 		da, enter the name of the	16. 3
			-
Name of New Registered Agent:			<u> </u>
			~
New Registered Office Address:		(Florida street address)	
New Registered Office Madress.			
	(7:)	, Florida	
	(City)	(Zip Code)	
lew Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I am		ept the obligations of the position.	
	Signature of Man Do	aistavad Agant if ahanaina	

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	$\underline{\mathbf{v}}$	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	VP	Carolyn F Papak	2714 Datura Street		
Add X Remove			Sarasota, FL 34239		
2) Change	VP	Maida G Cruze	113 Loblolly Lane		
X Add			Nokomis, FL 34275		
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

E. If amending or adding additional Art (attach additional sheets, if necessary).	icles, enter chang (Be specific)	<u>e(s) here</u> :		
N/A				
	<u> </u>			
<u> </u>				
	-			

	September 9, 2015	
The date of each amendmen date this document was signe	nt(s) adoption:	_, if other than the
Effective date if applicable:	September 9, 2015	
<u></u>	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date will not be the Department of State's records.	e listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) approval.	
☐ There are no members of adopted by the board of	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dated <u>9</u>	(11(15)	
Signature <u>/</u>	and I down	_
have	ne chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
R	oanld J. Gauthier	
_	(Typed or printed name of person signing)	
P	resident	
_	(Title of person signing)	