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Amend

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Honorthe FreePress N:	sinc.		
DOCUMENT NUMBER:	N15000007998			
DOCUMENT NUMBER:	•			
The enclosed Articles of Am	endment and fee are subm	nitted for filing.		
Please return all corresponde	ence concerning this matter	r to the following:		
ChristineSutherland				
	,	(Name of Contact Po	erson)	
		(Firm/ Company	y)	
4755TAMIAMI TRAIL NO	ORTHSUITE 60			
· · · · · · · · · · · · · · · · · · ·		(Address)		
Naples,FL 34103				
<u> </u>	((City/ State and Zip	Code)	
naplesnaples@gmail.com	ı			
E	-mail address: (to be used	for future annual rep	port notificatio	n)
For further information conc	erning this matter, please of	call:		
RonaldA. Kezeske		at	239	963-5063
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	yable to the Florida	Department of	State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certii is Certii (Add	60 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing A	ddress	<u>St</u>	reet 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 to Articles of Incorporation of

Honorthe FreePressInc.		
(Name of Corporation as cu	rrently filed with the Flo	rida Dept. of State)
N15000007998		
(Document N	umber of Corporation (if I	(nown)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not F</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:	
		The new
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	poration" or "incorporate	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE		
<u></u>		
		نِ 4 . وم
		5
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SEF
(onter the name of the
		<u> </u>
D. If amending the registered agent and/or registered	office address in Florida	, enter the name of the
new registered agent and/or the new registered off	ice address:	
Name of New Registered Agent:		
	a	Florida street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a		t the obligations of the position.
	Signature of New Regi.	stered 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 V SV	John Do Mike Jo Sally Sr	ones en es	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	SEC	_	RonaldA. Kezeske	414111thAve SW
X Add				Naples,FL 34116
Remove				
2) Change		_	<u></u>	
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change	-	_		
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)						
					-	
					,-	
					<u>.</u>	
0 - 11			· ···· · · · · · · · · · · · · · · ·			
						
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The date of each amendmen date this document was signed	i t(s) adoptio'n: _ d.	August28,2015	<u> </u>	, if other than th
Effective date if applicable:	August28, 20			
	(no	more than 90 days aft	er amendment file dat	e)
Note: If the date inserted in t document's effective date on			statutory filing require	ments, this date will not be listed as the
Adoption of Amendment(s)	(<u>C</u>	HECK ONE)		
The amendment(s) was/was/were sufficient for a		the members and the n	umber of votes cast fo	r the amendment(s)
There are no members o adopted by the board of		ed to vote on the amend	iment(s). The amendr	nent(s) was/were
Dated	9/1/15			
Signature 2	STA J	Joung		
have	not been selected	ce chairman of the boad, by an incorporator — fiduciary by that fiduci	if in the hands of a red	
_		Robert You		
		(Typed or printed	name of person signi	ng)
		VP		
		(Title	of person signing)	