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TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	Blue Blood Brotherho N:	ood, Inc.		. .		_
N DOCUMENT NUMBER: _	V16000006464					
The enclosed Articles of Ame	endment and fee are subm	nitted for filing.				_
Please return ail corresponder	ice concerning this matter	r to the following:				
Joseph A. Heintz, Jr.						
		(Name of Contact Pe	erson)	-		_
The Law Office Of Joseph A.	. Heintz, Jr., P.A.					
		(Firm/ Company	')			_
750 Tamiami Trail, #2A						
		(Address)	*			_
Port Charlotte, FL 33953						
	((City/ State and Zip (Code)	·	٠	_
jheintz@jheintzlaw.com					SEC.	-1
E-1	mail address: (to be used	for future annual rep	ort notification)	25 N	******
For further information conce	rning this matter, please of	call:			TARY OF BUILDING) }
Josehp Heintz		at _	(941) 206-222			5 =
(1	Name of Contact Person)		(Area Code)	(Daytime Telep	hone Number)	Ø
Enclosed is a check for the fol	llowing amount made pay	/able to the Florida D	Department of S	State:	·,··	
☐ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)		
Mailing Ad	idress	Str	oot Address			

Mailing Address
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

Blue Blood Brotherhood, Inc.		
(Name of Corporation as cur	rently filed with the Flo	rida Dept. of State)
N16000006764		
(Document No	umber of Corporation (if l	known)
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 corpo	oration:	
		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" 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>	
		· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable:		See 3
(Mailing address MAY BE A POST OFFICE BOX)		
		7 2 m
	*	<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 offi		67
Name of New Registered Agent:		
	(F	Florida street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe	red Agent:	
hereby accept the appointment as registered agent. I an		t the obligations of the position.
	Signature of Nau Basis	stered Agent, if changing
	signature of New Regis	sierea Ageni, ii 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	<u>V</u> <u>Mik</u>	n Doe te Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	TS	Duane Coldiron	750 Tamiami Trl, #2A
Add			Port Charlotte, FL 33953
Remove			
2) Change	S	Don Joseph	750 Tamiami Trl, #2A
Add			Port Charlotte, FL 33953
X Remove			
3) Change	CFO	Tuesday Browning	750 Tamiami Trl, #2A
X Add			Port Charlotte, FL 33953
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

l <mark>f amending or adding additional Arti</mark> attach additional sheets, if necessary).	(Be specific)
4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -	
	
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The	data of such among	dment(s) adoption:	, if other than the
	this document was s		, it other than the
date	ins document was s	07-08-2016	
Effe	ctive date <u>if applic</u>		
		(no more than 90 days after amendment file date)	
		d in this block does not meet the applicable statutory filing requirements, this e on the Department of State's records.	date will not be listed as the
Ado	ption of Amendme	nt(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amend for approval.	lment(s)
	There are no memb adopted by the boa	ers or members entitled to vote on the amendment(s). The amendment(s) was rd of directors.	/were
	Dated	12-14-2016	
	Signature _		
	(By the chairman or vice chairman of the board, president or other officer-if din have not been selected, by an incorporator – if in the hands of a receiver, trust other court appointed fiduciary by that fiduciary)	
		James W. Browning	
		(Typed or printed name of person signing)	
		President	
		(Title of person signing)	