N1600009133

(Řec	questor's Name)	<u>.</u>
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TO: Amendment Section Division of Corporations	· .				
NAME OF CORPORATION	EXPIRATION 2050,				
	16000009133				
The enclosed Articles of Amer	idment and fee are subm	nitted for filing.			
Please return all correspondence	e concerning this matter	to the following:			
Audrey K. Chisholm, Attorney	y at Law				
	((Name of Contact	Person)		
Chisholm Law Firm, LLC					
<u></u>		(Firm/ Comp	any)	. <u> </u>	
PO BOX 2189					
		(Address)	•		
Ortando, FL 32802					
	(City/ State and Z	ip Code)	<u> </u>	
audrey@chisholmfirm.com					
E-m	ail address: (to be used	for future annual	report notificat	ion)	
For further information concern	ning this matter, please c	call:			
Audrey K. Chisholm			407 at	674-2657	
(N	ame of Contact Person)			 (Daytime Telepho) 	ne Number)
Enclosed is a check for the foll	owing amount made pay	able to the Florid	la Department o	of State:	
S35 Filing Fee 🛛 [□\$43.75 Filing Fee & E Certificate of Status	□\$43.75 Filing F Certified Copy (Additional cop enclosed)	Cer y is Cer (Ac	2.50 Filing Fee tificate of Status tified Copy iditional Copy is closed)	
<u>Mailing Ado</u> Amendment Division of C P.O. Box 63. Tallahassee.	Section Jorporations 27		Street Addres Amendment Se Division of Co Clifton Buildin 2661 Executive Tallahassee, Fl	ection rporations 19 2 Center Circle	

Articles of Amendment to Articles of Incorporation of

EVOID ATION 2020 INC

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EXPIRATION 2050, INC.			
(<u>Name of Corporation as cu</u>	rrently filed with the Flor	ida Dept. of State)	
N16000009133			
(Document N	umber of Corporation (if k	nown)	
Pursuant to the provisions of section 617.1006. Florida Si mendment(s) to its Articles of Incorporation:	tatutes, this <i>Florida Not Fo</i>	r 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 <u>"Company" or "Co." may not be used in the name</u>	poration or "incorporated	t or the abbreviation "Corj.	or "Inc."
3. Enter new principal office address, if applicable:			
Principal office address MUST BE A STREET ADDR	ESS)	<u> </u>	
		·· <u> </u>	
			<u>_</u>
C. Enter new mailing address, if applicable:			201
(Mailing address <u>MAY BE A POST OFFICE BON</u>)			
		· · · · · · · · · · · · · · · · · · ·	<u></u>
	<u></u>		<u>, 19</u>
). If amending the registered agent and/or registered	office address in Florida.	enter the name of the	BIS MID IN
new registered agent and/or the new registered off		<u> </u>	
Name of New Registered Agent:			
	(f)	orida street address)	
<u>New Registered Office Address</u> :			
		, Florida	
	(City)	(Zip Code)	

Signature of New Registered Agent. if changing

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)

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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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT</u> John I <u>V</u> Mike.: SV Sally S	lones	
<u>Type of Action</u> (Check One)	Title	Name	Address
1) Change	D	CICAOSKI, JAMES	3000 CLARCONA RD., LOT 472
Add			АРОРКА, FL 32703
XRemove			
2) Change	CSA	JENNIFER LARSON	847 Tonkawa road
X Add			Orno .MN 55356
Remove			
3 1 Change	AD	Kaley Viola	318 Stillwater Drive
X Add			Horseheads, NY 14845
Remove			
4) Change	C 00	Trey Radel	4360 Lazio Way #1008
X Add			Fort Myers, FL 33901
Remove			
57 Change	ED	Jenna Hogg	728 Fairmont Drive
Ndd			Brandon, FL 33511
Remove			
6) Change	<u> </u>		
Add			
Remove		Page 2 of 4	

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E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

____ _____ ____ _____ ____ _____ ____ ____

Page 3 of 4

The date of each amendment(s) adoption:	if other than the
date this document was signed.	

Effective date if applicable:

(no more than 90 days after amendment file date)

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated Signature be chairman of vice sharman of the board president or other officer-if directors TBV have not been selected, by an mearporator - if in the hands of a receiver, trustee, or

other court appointed fiductary by that fiduciary)

Frank Viola III

(Typed or printed name of person signing)

Director/ Registered Agent

(Title of person signing)