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SEGRETARY OF STATE OF STATE OF STATE OF COGROTATIONS

HAR OB ZOTI C INCHAIR

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	RSB JAX INC			打想
DOCUMENT NUMBER:	N170000001574			3
The enclosed Articles of An	nendment and fee are subm	nitted for filing.		5
Please return all correspond	ence concerning this matter	r to the following:		
RICKY THROWER				
		(Name of Contact Persor	1)	
PADGETT BUSINESS SE	RVICES			
		(Firm/ Company)		
12086 FORT CAROLINE	ROAD, STE 301			
		(Address)		
JACKSONVILLE, FL 3222	25			
	((City/ State and Zip Code	c)	
RICKY@PADGETTACCO	OUNTING.COM			
T.	-mail address: (to be used	for future annual report	notification)
For further information cond	erning this matter, please	call:		
RICKY THROWER	(904) 854-982 at			
<u> </u>	(Name of Contact Person)		ea Code)	(Daytime Telephone Number)
Enclosed is a check for the f	following amount made pay	yable to the Florida Depa	rtment of S	State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Difiling Fee cate of Status ed Copy ional Copy is sed)

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
Taliahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

RSB JAX INC	•
(Name of Corporation as currently filed w	th the Florida Dept. of State)
N170000001574	
(Document Number of Corpo	oration (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this Florament(s) to its Articles of Incorporation:	ida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation" or "it "Company" or "Co." may not be used in the name.	The new accorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the
Name of New Registered Agent:	
New Registered Office Address:	(Florida street addross)
	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	und accept the obligations of the position.
Simple of the state of the stat	New Paristand Apart 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 John I V Mike SV Sally		
Type of Action (Check One)	Title	Name	Address
1) Change			
Add			
2) Change			
Add			
3)Change			
Add			
4) Change			
Add			
5) Change			
Add			
6)Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
ADD ARTICLE IX TO READ
Upon the dissolution of this organization:
ASSETS SHALL BE DISTRIBUTED FOR ONE OR MORE EXEMPT PURPOSES WITHIN THE MEANING OF
SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR CORRESPONDING SECTION OF ANY FUTURE
FEDERAL TAX CODE, OR SHALL BE DISTRIBUTED TO THE FEDERAL GOVERNMENT, OR TO A STATE OR
LOCAL GOVERNMENT, FOR PUBLIC PURPOSE
•

	03/01/2017	
The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
Effective date it applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blodocument's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not partment of State's records.	it be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes cast for the amendment(s) al.	
There are no members or mem adopted by the board of direct	bers entitled to vote on the amendment(s). The amendment(s) was/were fors.	
03/01/2017 Dated		
Signature	Juste Gray	
have not be	rman or vice chairman of the board, provident or other officer-if directors cen selected, by an incorporator — if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
KRISTI	en gray	
	(Typed or printed name of person signing)	
PRESID	DENT	
	(Title of person signing)	