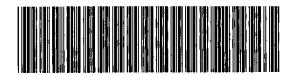
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(Document Number)
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COVER LETTER

TO: Amendment Section Division of Corporations Manatee County Energoncy Services
Honor Guard The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ee County Eversong Services Honor Guard (Address) (City/ State and Zip Code) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Certificate of Status -- Certified Copy

(Additional copy is

enclosed)

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certificate of Status

(Additional Copy is Enclosed)

Certified Copy

Articles of Amendment to

Articles of Incorporation of

Manatel County (Name of Corporation as of	Emergence	Services	Honor 6
		orida Dept. 01 State)	
// 7000039	5 4 <i>O</i> Number of Corporation (if	`known)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	•	,	dopts the following
A. If amending name, enter the new name of the cor	poration:		
			The new
name must be distinguishable and contain the word "co." may not be used in the name.	orporation" or "incorpora	ed" or the abbreviation	"Corp." or "Inc."
B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDI			
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	P.O. B	04 20216	
		on , FL 3	
	DIE OUR FO	$\frac{5r}{l}$	7 2.0 9
	<u>-</u>		7
D. If amending the registered agent and/or registered new registered agent and/or the new registered o		a, enter the name of the	
	ince aduress:		
Name of New Registered Agent:			
	.	Florida street address)	
New Registered Office Address:	,	rioriuu sireet auaress)	
		, Florida	A
	(City)	(Zip C	Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent.		pt the obligations of the p	osition.
, 	Signature of New Reg	istered 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	<u>V</u> <u>Mik</u>	<u>n Doe</u> re Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	Trea	ashley Robinson	16718 Scenic Hill Wi Wi marma, FL 3359
Remove 2) Change Add	Tren	Prchard Jay Martin	3505 15th ST & Ellenton, FL 34222
Remove 3) Change Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

If amending or adding addit (attach additional sheets, if ned	cessary). (Be	specific)				
						
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4. 77						

	e date of each amendment(s) ad	option:	, if other than the
date	e this document was signed.		
Eff	ective date <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	
<u>Not</u> doc	te: If the date inserted in this blocument's effective date on the Dep	k does not meet the applicable statutory filing requirements, thi artment of State's records.	s date will not be listed as the
Add	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amer.	ndment(s)
Ø	There are no members or memb adopted by the board of directo	ers entitled to vote on the amendment(s). The amendment(s) was:	ıs/were
	Dated	4/17	
	Signature	no	
	have not bee	nan or vice chairman of the board, president or other officer-if can selected, by an incorporator — if in the hands of a receiver, true oppointed fiduciary by that fiduciary)	
		Matt 6arcs (Typed or printed name of person signing)	
	·	President	
		(Title of person signing)	