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Amend

AUG 18 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

KNIGHT FAMILY VI:	SION, INC.		
N17000006149			
DOCUMENT NUMBER:			-
The enclosed Articles of Amendment and fee are submit	ited for filing.		
Please return all correspondence concerning this matter t	to the following:		
AMANDA LEIGH GOODMAN, ESQ.			
(1)	Same of Contact Pe	rson)	
GOODMAN BREEN			
	(Firm/ Company)	
3838 TAMIAMI TRI. N STE 300			
	(Address)		
NAPLES, FL 34103			
(C	City/ State and Zip C	Code)	
GBANNUAL@GMAIL.COM			
E-mail address: (to be used for	or future annual repo	ort notification)	, , , , , , , , , , , , , , , , , , ,
For further information concerning this matter, please ca	ill:		
AMANDA LEIGH GOODMAN	at	239	403-3000
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made paya	ble to the Florida D	Department of S	tate:
	\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certific Certific	Filing Fee cate of Status and Copy conal 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
Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

Article	es of Amendment	.
Articles	to s of Incorporation	a Dept. of State)
	of	
KNIGHT FAMILY VISION, INC.		7 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 .
(Name of Corporation as curren	tly filed with the Florid	a Dept. of State)
N17000006149		7.9
(Document Number	er of Corporation (if kno	wn)
Pursuant to the provisions of section 617.1006, Florida Statute mendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For I</i>	Profit Corporation adopts the following
a. If amending name, enter the new name of the corporati	ion:	
		The new
ame must be distinguishable and contain the word "corporat	tion" or "incorporated"	or the abbreviation "Corp." or "Inc."
Company" or "Co." may not be used in the name.	5660 STRAND CT	
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)		·
rrincipal office duaress <u>prost BLASTKELT APPIKESS</u>)	NAPLES, FL 34110-33	343
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5660 STRAND CT	
	NAPLES, FL 34110-33	343
). If amending the registered agent and/or registered office		nter the name of the
new registered agent and/or the new registered office a	.daress:	
Name of New Registered Agent:		
<u></u>		
New Registered Office Address:	(Flori	ida street address)
		, Florida
 -	(City)	(Zip Code)
and the state of t		
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fai		ne obligations of the position.
	·	· •
<u></u>	ignature of New Register	red 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	$\overline{\underline{\mathbf{v}}}^-$	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) X Change	PTD	JEFFREY A KNIGHT	5660 STRAND CT
Add			NAPLES, FL 34110-3343
Remove			
2) X Change	VPSD	RAMONA M KNIGHT	5660 STRAND CT
Add			NAPLES, FL 34110-3343
Remove	D	IPAINIEED A RECCLED	5660 STRAND CT
3) X Change	D	JENNIFER A KESSLER	NAPLES, FL 34110-3343
Add Remove			NAFEES, FE 34110-3343
4) X Change	D	ASHLEY NICOLE KNIGHT	5660 STRAND CT
Add			NAPLES, FL 34110-3343
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

attach additiona	adding additional A d sheets, if necessary,). (Be specific)		•	·	
			 			
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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)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date v document's effective date on the Department of State's records.	vill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(was/were sufficient for approval.	(s)
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 8/11/17	
Dated 8/11/17 Signature A. Knight	
(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
JEFFREY A KNIGHT	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	,