

| (Requestor's Name) | | |
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| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT | MAIL | |
| (Business Entity Name) | | |
| (Document Number) | | |
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SECRETARY OF STATE

TO END

HAR 0 2 2018 T. LEAMEUX



COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION | CLOVEREAF ROY | 'ALS CORP | | |
|--------------------------------|---|--|----------------------|---|
| DOCUMENT NUMBER: | N18000000210 | | | |
| The enclosed Articles of Am | nendment and fee are subr | nitted for filing. | | |
| Please return all corresponde | ence concerning this matte | r to the following: | | |
| MARILYN LEWIS | | | | |
| | | (Name of Contact P | erson) | |
| CLOVERLEAF ROYALS | | | | |
| | | (Firm/ Company | y) | |
| 2345 NW 166 ST | | | | |
| | | (Address) | | |
| MIAMI GARDENS, FL 330 | 054 | | | |
| | (| City/ State and Zip | Code) | |
| MALLYV1968@GMAIL.Co | ОМ | | | |
| E- | -mail address: (to be used | for future annual rep | ort notification |) |
| For further information conce | erning this matter, please of | eall: | | |
| MARILYN LEWIS | | at | 305 | 710-3893 |
| (| Name of Contact Person) | | (Area Code) | (Daytime Telephone Number) |
| Enclosed is a check for the fo | ollowing amount made pay | able to the Florida I | Department of S | tate: |
| ■ \$35 Filing Fee | □\$43.75 Filing Fee & □ Certificate of Status | 3\$43.75 Filing Fee Certified Copy (Additional copy is enclosed) | Certific Certific | Filing Fee cate of Status ed Copy onal Copy is sed) |
| Mailing Ac | <u>ldress</u> | Str | eet Address | |

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

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

Articles of Amendment to Articles of Incorporation of

| CLOVERLEAF ROYALS CORP | | | |
|---|---------------|---|-------------------------------|
| (Name of Corporation | as curren | tly filed with the Florida Dept. o | f State) |
| N18000000210 | | | |
| (Docu | ment Numb | er of Corporation (if known) | |
| Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation: | orida Statute | s, this <i>Florida Not For Profit Cor</i> | poration adopts the following |
| A. If amending name, enter the new name of th | e corporati | on: | |
| NA | | | The new |
| name must be distinguishable and contain the wor "Company" or "Co." may not be used in the nam | | ion" or "incorporated" or the abl | breviation "Corp." or "Inc." |
| B. Enter new principal office address, if applications | able: | MARILYN LEWIS | |
| (Principal office address MUST BE A STREET | IDDRESS) | 2345 NW 166 ST | |
| | | MIAMI GARDENS, FL 33054 | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | MARILYN LEWIS | |
| | | 2345 NW 166 ST | |
| | | MIAMI GARDENS, FL 33054 | |
| D. If amending the registered agent and/or regi | istered offic | e address in Florida, enter the n | ame of the |
| new registered agent and/or the new registe | | | <u> </u> |
| MARILYN LEWIS Name of New Registered Agent: | | | |
| | 2345 NW | 166 ST | |
| New Registered Office Address | | (Florida street ad | dress) |
| HEW NEGISIEI EU Office num ess | MIAMI G | ARDENS | 33054 |
| | | (City) | , Florida (Zip Code) |
| Name Danisham d America Cinnada a 28 abourtan | nt_aa | | |
| New Registered Agent's Signature, if changing I hereby accept the appointment as registered ages | nt, lam fai | <u> </u> | ons of the position. |
| | Mar | lyn J. Jani | ν AL SE |
| • | Si | Anature of New Registered Agent, | if changing HAR 31 |
| | I | Page 1 of 4 | \$5 T 15 |

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 | <u>V</u> <u>Mik</u> | 1 Doe e Jones | |
|-----------------------------------|-----------------------|---------------------|---------------------------------------|
| X Add Type of Action (Check One) | <u>SV</u> <u>Sall</u> | <u>y Smith</u> Name | <u>Addres</u> s |
| 1) Change | P | MARY MASON | 19458 NW 28 PL |
| Add | -, | | MIAMI GARDENS, FL 33056 |
| X Remove | | | |
| 2) Change | S | MARILYN LEWIS | 2345 NW 166 ST |
| X Add | | | MIAMI GARDENS, FL 33054 |
| Remove | | | |
| 3) Change | V | BRENDA R WASHINGTON | 7932 PLANTATION BLVD |
| Add | | | MIRAMAR, FL 33023 |
| X Remove | | | |
| 4) Change | T | PATRICIA TAYLOR | 910 NW 203 ST |
| X Add | | | MIAMI GARDENS, FL 33169 |
| Remove | | | |
| 5) Change | | | |
| Add | | | · · · · · · · · · · · · · · · · · · · |
| Remove | | | |
| б) Change | | | |
| Add | | | |
| Remove | | | |

| The date of each amendment(s) adoption: | , if other than the |
|---|----------------------------------|
| late 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 locument's effective date on the Department of State's records. | s date will 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 amenwas/were sufficient for approval. | ndment(s) |
| There are no members or members entitled to vote on the amendment(s). The amendment(s) we adopted by the board of directors. | as/wcre |
| MON 02-19-2018 Dated | |
| Signature Many To Lowin | |
| (By the chairman or vice chairman of the board, president or other officer-if of have not been selected, by an incorporator – if in the hands of a receiver, tru | |
| other court appointed fiduciary by that fiduciary) | , ., |
| Mar. lyn Z. Lewis (Typed or printed name of person signing) | |
| Maily J. Lewis | |
| (Title of person signing) | |