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COVER LETTER

Division of Corporations NAME OF CORPORATION: 1900000199 DOCUMENT NUMBER: he enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person) E-mail address: (to be used for future annual report notification) or further information concerning this matter, please call: (Name of Contact Person) iclosed is a check for the following amount made payable to the Florida Department of State: ∠ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed) Mailing Address Street Address Amendment Section Amendment Section

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

FO: Amendment Section

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

United Carun Nauy Inc	
Name of Corporation (a) currently filed with the Florida NIGADDO 1094	i Dept, of State)
	nber of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statumendment(s) to its Articles of Incorporation:	utes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ation:
	The new
name must be distinguishable and contain the word "corpor Company" or "Co." may not be used in the name.	ration" or "incorporated" or the abbreviation "Corp," or "Inc,"
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRES.</u>	<u>S</u>)
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	87 Windridge Court Farana Cuty Beach, FI
	32413
If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	(City) (Zip'Code)
w Registered Agent's Signature, if changing Registere rehy accept the appointment as registered agent. I am j	· · · · · · · · · · · · · · · · · · ·
	Nine Design I Come if the series
	Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name. nd address of each Officer and/or Director being added: Attach additional sheets, if necessary) lease note the officer/director title by the first letter of the office title: ? = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief xecutive Officer, CFO = Chief Financial Officer - If an officer/director holds more than one title, list the first letter of each officeeld. President, Treasurer, Director would be PTD. Thanges 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 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, tike Jones, V as Remove, and Sally Smith, SV as an Add. lxample: X Change <u>John Doe</u> X Remove Mike Jones Sally Smith $X \land Add$ Address vpe of Action Title <u>Name</u> Check One) Todd Terrell _ Remove) ____ Change ____ Add Remove __ Change Add _Remove ∞) ____ Change ____ Add _ Remove ____ Change __ Add _Remove) ____ Change ____ Add ____ Remove Page 2 of 4 . If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

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	Page 3 of 4	سالد آمال	•
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te date of each amendment(s) adoption:	,		_, if other than th
fective date <u>if applicable</u> :			
(no more th	an 90 days after amendment file a	late)	
te: If the date inserted in this block does not meet t			oe listed as the

te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nument's effective date on the Department of State's records.

option 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.

Signature

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

TOATEMEL

(Typed or printed name of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.

FILED

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SECRETARY OF STATE OF BA