# Naacoo laago

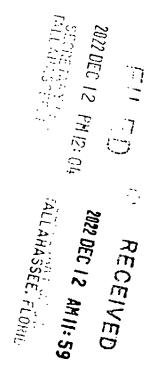
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al Instructions to Filing Officer:
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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPORATION: WE LOC'D TIGHT INCORPORCATION
DOCUMENT NUMBER: N 220000 1 2 2 9 0
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dominique P. Reed (Name of Contact Person)
we vecid that
Holo South Third Smeet # 1115
Tooksonville Beach, FL 32250 (City/ State and Zip Code)
E-mail address: (to be used for uture annual report notification)
For further information concerning this matter, please call:
Dominique Peed at 904 303, 9883 (Area Code) (Daytime Telephone Number)
Enclosed 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  Certificate of Status (Additional copy is enclosed) □ \$52.50 Filing Fee Certificate of Status (Certified Copy (Additional Copy is Enclosed)

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

# Street Address

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

we Loc'd Tight	TUCOL bology	<u>ian</u>
	orida Dept. of State)	
N39000019	1240 1240	<u> </u>
(Document	Number of Corporation (if known)	公元 ス
Pursuant to the provisions of section 617,1006, Florida	Statutes, this Florida Not For Profit	Corporation adopts the following
amendment(s) to its Articles of Incorporation:		7
A. If amending name, enter the new name of the corporation:		. O:
		The new
name must be distinguishable and contain the word "co"Company" or "Co." may not be used in the name.	orporation" or "incorporated" or the	abbreviation "Corp." or "Inc."
Company or Co. may not be used in the name.		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
ti incepui office unuress most be A STREET ADD	<u>KE33</u> )	
	<del>-</del>	<del></del>
C. Enter new mailing address, if applicable:	11.	
(Mailing address <u>MAY BE A POST OFFICE BO)</u>	<u> </u>	
D. If amending the registered agent and/or register- new registered agent and/or the new registered of	<u>ed office address in Florida, enter th</u> office address:	e name of the
Name of New Registered Agent:		
	(FI 11	
New Registered Office Address:	(Florida strect	address)
	(City)	, Florida (Zip Code)
Non-Bosinson d Louis Co.	• •	
New Registered Agent's Signature, if changing Regi I hereby accept the appointment as registered agent. I	stered Agent: 'am familiar with and accept the oblive	ations of the position.
	,	
	Signature of New Registered Ager	u, 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>1 Doe</u> e Jones y Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) Change Add	<u>S</u>	Erita	Mann_	COSC EIII # JIII P.	earling gate
Remove  2) Change Add	<u>T</u>	Nikki	L. Janson	4016 Sadth Third Suft 4115, JOCKSO	This peak
Remove Change Add	$\overline{\mathcal{Q}}$	Star A	unington	4d( South Third S	
Remove  4) Change Add	$\mathcal{D}^{-}$	Jamor	al Greenfield	Hora South Third	- Sheet <sup>H</sup> iii: IL 83388
Remove 5) Change Add				· · ·	
Remove 6) Change Add			. <u>-</u>		- - -
Remove  E. If amending or ad					_
(attach additional s	ncets, if necessar	v). (Be specific)			
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The date of each amendment(s) adoption: date this document was signed.				, if other than the
Effective date if applicable:				
(no	more than 90 days after	amendment file date	•)	
Note: If the date inserted in this block does n document's effective date on the Department	not meet the applicable st of State's records.	atutory filing require	ments, this date will no	t be listed as the
Adoption of Amendment(s)	CHECK ONE)			
	<del></del> :	mhar of votas and fo	or the amandments	
☐ The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the nu	moer of votes cast ic	i the amendment(s)	

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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

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)

(Typed or printed name of person signi

(Title of person signing)