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(Address)						
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(Cit	ty/State/Zip/Phone	e #)				
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON: DISTRICT	35-0 40	NS PA	ROJECT	R161tT	10
DOCUMENT NUMBER:	N 940000	05261	· · · · · · · · · · · · · · · · · · ·			
The enclosed Articles of Am	endment and fee are sub-	mitted for filing.				
Please return all corresponde	nce concerning this matte	er to the following:				
			•		•	
·	TED ER			, ,		
		(Name of Contact Pers	onj			
DISTRICT	35-0 L10	NS PROJE	CT R	16 <i>HT</i>	TO 51	6HT
:		(Firm/ Company)	·			
PO 80	8 53 B					
		(Address)				
0 COEE	FL	34761				
		(City/ State and Zip Co	de)			
TEDER	ION @ YA	HOO, CON)			
	-mail address: (to be used				 _	
For further information conc	erning this matter, please	call;	,			
•	•	•			<u>ه ــ خ</u>	
	ERION	at	407	366	- 076 ephone Number)	<u>/</u>
1	(Name of Contact Person)) (4	Area Code)	(Daytime Tele	ephone Number)	
Enclosed is a check for the fo	ollowing amount made pa	yable to the Florida Dep	partment of St	ate:		
West Eiling Pag	□\$43.75 Filing Fee &	M¢42 75 Filing Fee &	∏¢≤2 €0.	Filing Fee		
and and runig rec	Certificate of Status	Certified Copy	Certific	ate of Status		
	•	(Additional copy is	Certifie			
٠.		enclosed)	Enclose	onal Copy is ed)		
Na ilia A	4.4	54	4 4 4 4			

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 to Articles of Incorporation of

INC.

DISTRICT 35-0 LIONS &	ROJECT	R161+7	T \circ	5/64
(Name of Corporation as current	tly filed with the Flo	rlda Dept. of State)		
N 94 000005261				
(Document Number	er of Corporation (if	known)		
ursuant to the provisions of section 617.1006, Florida Statute	e this <i>Florida Not F</i>	or Profit Cornoration	adonts the f	nllowing
mendment(s) to its Articles of Incorporation:		or royal corporation	адория на н	<u>.</u>
. If amending name, enter the new name of the corporati	on.			
. If amending name, enter the new name of the corporati	<u> </u>			
NA				The new
ame must be distinguishable and contain the word "corporat Company" or "Co." may not be used in the name.	ion" or "incorporate	ea" or the abbreviation	n "Corp." oi	inc.
	.10 .			
. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	NIA			
incepu office university of A STREET ADDRESS)				
•	•			17
				<u> </u>
Enter new mailing address, if applicable:	مأه			<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)				- 3
			(T.F.) + +	- - ;
		•	E S	=¥
			Æ.	: 2
If amending the registered agent and/or registered offic new registered agent and/or the new registered office at		<u>, enter the лате of t</u>	<u>he</u> >> '	·
			•	
Name of New Registered Agent: 📈 🗛	<u> </u>			
New Registered Office Address:	(F	lorida street address)		
New Negastereu Office Augress.				
	(O:- \)	, Florid		
	(City)	(ZII	Code)	
ew Registered Agent's Signature, if changing Registered				•
ereby accept the appointment as registered agent. I am fan	illiar with and accept	t the obligations of the	position.	
	•			
		tered Agent, if changi		

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: XChange Remove Add	<u>V</u> <u>Mike</u>	Doe e Jones v Smith		
Type of Action (Check One)	Title	<u>Name</u>	Address	
1) Change		NAVARRO, MIRIA	4 3460 HILLMO	unt cir
Add			ORLANDO PL	
X Remove		•		-
2)Change	T	LANGELLO, JOE	PO BOX 2865	<u>.</u>
X Add	•		PLAGUER BEACH	pu 3213.
Remove		·		_
3) Change				·
Add	,			_
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4) Change				
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Remove				_
5) Change	· ·	· .		
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Remove	,			•
6) Change				
Add				
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E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	igots) iioto.			
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The date of each amendment(s) adoption date this document was signed.	1: <u> </u>	NE	22	2017	, if other than th
Effective date if applicable:	JUVE	22		2017	
	(no more than 9	0 days afi	ter amen	dment file date)	
Note: If the date inserted in this block doe document's effective date on the Department	-		statutory	filing requirements, th	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE	D		•	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members	and the n	umber o	votes cast for the ame	ndment(s)
☐ There are no members or members en adopted by the board of directors.	titled to vote on	the amen	dment(s)	The amendment(s) w	as/were
Dated					
Signature <u>Theodi</u>	u I C	in	PM	sident	-
	cted, by an incor	porator –	if in the	lent or other officer-if hands of a receiver, tru	
THEO	PORE		100		
	(Typed	or printed	I name of	person signing)	•
				,	
PRE	SIDEN'	T			
		(Title	of perso	n signing)	