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18 JUN 25 AM 8: 01

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	STERBLASTERS, INC
N95000000930	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
MARSHALL G. DUTTON	
	(Name of Contact Person)
THE EOD MASTERBLASTERS, INC	
	(Firm/ Company)
716 CRESTVIEW AVE	
	(Address)
NICEVILLE, FL 32578	
	(City/ State and Zip Code)
info@afmasterblasters.com	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, p	lease call:
MARSHALL G. DUTTON	850 832-3437
(Name of Contact Pe	
Enclosed is a check for the following amount ma	de payable to the Florida Department of State:
\$35 Filing Fee \$\sum \\$43.75 Filing Fe Certificate of Sta	te & 🗆\$43.75 Filing Fee & — \$52.50 Filing Fee atus Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing Address	Street 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

FILED

18 JUN 25 AM 8: 01

THE EOD MASTERBLASTERS, INC			SE OF THE PROPERTY
(Name of Corporation	as currently f	filed with the Florida D	ept. of State)
N95000000930			
(Docur	ment Number o	f Corporation (if known)	
Pursuant to the provisions of section 617.1006, Floramendment(s) to its Articles of Incorporation:	orida Statutes, th	nis <i>Florida Not For Pro</i> j	fit Corporation adopts the following
A. If amending name, enter the new name of the	e corporation:		
N/A			The new
name must be distinguishable and contain the word "Company" or "Co," may not be used in the name		" or "incorporated" or	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		'A	
		/A	
		Ά	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		/A	
	N/	Α	
	N.	/A	
D. If amending the registered agent and/or regis			the name of the
Name of New Registered Agent:	MARSHALL	. G. DUTTON	
Hune of New Registered Agent.	3511 MOORE	E ROAD	
		(Florida s	treet address)
New Registered Office Address:			
	MARIANNA		, Florida
	(6	City)	(Zip Code)
New Registered Agent's Signature, if changing R hereby accept the appointment as registered agen	Registered Age nt. I am familio	ent: ar with and accept the oi	oligations of the position.
_	Melia	U.H.D.	st-
	Signa	ture of New Registered :	igeni, 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 hold. 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	\underline{V} \underline{M}	ohn Doe ike Jones ally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	ROB J. BROOKING	51 HILLCREST DR
Add			SHALIMAR, FL 32579
X Remove			<u> </u>
2) X Change	<u> P</u>	DANIEL T. TOMPKINS	5205 BROOKSIDE DR
A d d			BAKER, FL 32531
Remove			
3) Change	<u>v</u>	MITCHELL R. SHIMMEL	4914 BARRETT WAY
X Add			PANAMA CITY, FL 32404
Remove			
4) Change	<u>s</u>	MARSHALL G. DUTTON	3511 MOORE ROAD
XAdd			MARIANNA, FL 32448-9209
Remove			
5) Change	1'	DENISE S. DUTTON	3511 MOORE ROAD
XAdd			MARIANNA, FL 32448-9209
Remove			
6) Change	<u>S</u>	MARK L. FOGEL	905 LIDO CIRCLE E
Add			NICEVILLE, FL 32578
X Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
REMOVE: Treasurer, ANGELIA F. FOGEL, 905 LIDO CIRCLE E, NICEVILLE, FL 32578 Daniel Taber Tompkins, formerly listed as Taber T. Tompkins and Vice President, was elected to President.					

	date of each amend		, if other than the
late	this document was s	igned.	
		JUNE 20. 2018	
CH	ective date <u>if applic</u> :	(no more than 90 days after amendment file date)	
		d in this block does not meet the applicable statutory filing requirements, this e on the Department of State's records.	date will not be listed as the
Ado	option of Amendme	nt(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amen for approval.	dment(s)
	There are no membradopted by the boar	ers or members entitled to vote on the amendment(s). The amendment(s) ward of directors.	s/were
	Dated	JUNE 20, 2018	
	Signature _	Wellett H. With	
	1	By the chairman or vice chairman of the board, president or other officer-if d have not been selected, by an incorporator – if in the hands of a receiver, trus other court appointed fiduciary by that fiduciary)	
		MARSHALL G. DUTTON	
		(Typed or printed name of person signing)	
		SECRETARY	
		(Title of person signing)	