## N950000002419

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## **COVER LETTER**

TO: Amendment Section .

P.O. Box 6327

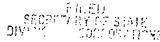
Tallahassee, FL 32314

Division of Corporations -PATIONAL, INC. treedon NAME OF CORPORATION: N95000002419 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CRAIG SMINI (Name of Contact Person) (Address) Poniprino Bench, El 33069 (City/State and Zip Code) Coral, Smolen @ amail (com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy is enclosed) Enclosed) **Mailing Address Street Address** Amendment Section Amendment Section **Division of Corporations Division of Corporations** 

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



FINANCIAL FREE	DOW NATIO	mar INC 16 FEB 29 PH
(Name of Corporation as	currently filed with the Flo	rida Dept. of State)
N9506000	22419	
(Document	Number of Corporation (if I	known)
rsuant to the provisions of section 617.1006, Florida nendment(s) to its Articles of Incorporation:	Statutes, this Florida Not F	or Profit Corporation adopts the following
If amending name, enter the new name of the co	rporation:	
		The new
ame must be distinguishable and contain the word "c Company" or "Co." may not be used in the name.	orporation" or "incorporate	ed" or the abbreviation "Corp." or "Inc."
Enter new principal office address, if applicable		
rincipal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u> )	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO.	X)	
	_	
If amending the registered agent and/or register new registered agent and/or the new registered of		a, enter the name of the
new registered agent and/or the new registered	Jilice address.	
Name of New Registered Agent:		
<del></del>	(1	Florida street address)
New Registered Office Address:		
	, Florida	
	(City)	(Zip Code)
	!	
ew Registered Agent's Signature, if changing Registereby accept the appointment as registered agent.	isterea Agent: I am familiar with and accer	of the obligations of the position.
and the second s	janimiar irini ama accep	
<del></del> -	Cionatana of Nov. Desi	intered Agent if changing
	Signature of New Regi	istered Agent, 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>n Doe</u> <u>e Jones</u> <u>y Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	JENERLY MARCUS	260SW NATURA AVE DERFIELD BEACH
Remove			FL 33441
2) Change	P	CRAG SMITH	1410 SW 3rd St. Pompano Beaul
Remove 3) Change Add			FL 33069
Remove 4) Change Add		<del></del>	
Remove  5) Change Add			
Remove 6) Change			
Add			<del></del>

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)			
		-		
			<u>-</u>	 
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The date of each amendment(s) ac	doption:	, if other than the
late this document was signed.		050000000000000000000000000000000000000
Effective date <u>if applicable</u> :		DIV SEPRE THE LIFE SHALL
	(no more than 90 days after amendment file date)	******
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the 2: 22
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ac was/were sufficient for approve	dopted by the members and the number of votes cast for the amendmental.	nt(s)
There are no members or mem adopted by the board of direct	bers entitled to vote on the amendment(s). The amendment(s) was/wer ors.	re
Dated2/	122/14	
Signature		<del></del>
Chave not be	rman or vice charman of the board, president or other officer-if directed on selected, by an incorporator – if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary)	
	Teneny Mareus	_
	(Typed or printed name of person signing)	
1	President	_
	(Title of person signing)	