P00000017313

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COVER LETTER

TO: Amendment Section Division of Corporations Kallan Investments -NAME OF CORPORATION: 700000017213 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: n Involvents For further information concerning this matter, please call: 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 Certified Copy (Additional copy is Certified Copy enclosed) (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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 TIVES JOANNE TO TOUSIAN

Articles of Amendment to

Articles of Inco	rporation	
Kallan Invertments	Inc	
(Name of Corporation as currently	filed with the Florida Dept. of State)	
P0000001	7213	
(Document Number of	Corporation (if known)	<u> </u>
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the followin	g amendment(s) to
A. If amending name, enter the new name of the corporation:		
NIX		_The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "F	Co". A professional corporation name must	bbreviation contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NTA	
C. Enter new mailing address, if applicable:		<u> </u>
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
	MIT	
		一心 三型
		
D. If amending the registered agent and/or registered office addre	ss in Florida, enter the name of the	25.55
new registered agent and/or the new registered office address:	V// 0	5
Name of New Registered Agent	MIX	_ 3
(Florida stree	et address)	-
M	121	
New Registered Office Address:	, Florida	Code)
·		
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.	
Signature of New Re	gistered 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:	ve, una san	y Smith, Sr us un Auu.	
X Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) K Change	<u>\</u>	James Murphy	6748 Memorial Hw Tampy FL 33615
Add		·	Tampy FL 33615
Remove			<u> </u>
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			-11
Remove			

	adding additional Articles, enter change(s) here: al sheets, if necessary). (Be specific)
_ 	
	at avaide for a probable probable of issued shows
provisions fo	ent provides for an exchange, reclassification, or cancellation of issued shares. implementing the amendment if not contained in the amendment itself:
(if not ap	olicable, indicate N/A)
Vivi	Marianha 99 charas
FUVIN	Murphy 99 shares 5 Murphy 1 share
Trine	i Murahi I Sharp

The date of each amendment(s) adoption:
Effective date if applicable: (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by" (voting group)
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signature (By a director, president or other officer – if directors or officers 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 signing)
(1 yped of printed name of person signing)
(Title of person signing)