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(Re	equestor's Name)	
(Ac	dress)	·
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
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TALL AHASSEE, FLORID HVISTOR OF CORPURATION TALL AHASSEE, FLORIDO HANDER OF THE OFFI TALL AHASSEE, FLORIDO TAL

RECEIVED

OB MAY 19 PM 1:22 SECRETARY OF STATE

100 PC = 5/19/08

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

15

	•	•
NAME OF CORPORATION:	opical Smoothie Ve	ntures II, In
DOCUMENT NUMBER: POOC	00080021	
The enclosed Articles of Amendment and	d fee are submitted for filing.	
Please return all correspondence concern	ing this matter to the following:	
Sam C	Socne (Name of Contact Person)	
Tropical	Smoothie Ventures -	II, Inc
3521 Ma	clay Blvd (Address)	
Tallahassee	FL 32312 City/ State and Zip Code)	
For further information concerning this n	• •	
So Ospaca	w 950 × 509-	9.228
(Name of Contact Person)	at (850) 509- (Area Code & Daytime	Telephone Number)
Enclosed is a check for the following ame		, ,
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status		☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations	Street Address Amendment Section Division of Corporations	

Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301

At theirs of American Control of the	
Articles of Incorporation PM 1: 22	
of SECRETARY OF STATE TALLAHASSEE. FERRIDA	
(Name of corporation as currently filed with the Florida Dept. of State)	
Drown on Bla. 3-	
(Document number of corporation (if known)	
\cdot	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:	
NEW CORPORATE NAME (if changing):	
NEW CORT DRAFE (If changing).	
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")	
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")	
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	
I would like to arrivered to delete Somue L	
Osborne as PD.	
I would like to amend to add	
Donald Shrum as President	
3521 Marclay Blyd	
Tallahassee, El. 32312	
I would like to amend to add	
Angela Shrum as Vice President 3521 Madday Blyd Tallahassee, #1 32312 Please	-
2521 Manday Blud Tollahassee . #1. 32317 Dierse s	see
(Attach additional pages if necessary)	2) HC
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions	
for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A	7)

(continued)

FILED

The date of each amendment(s) adoption: 5/19/08
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (<u>CHECK ONE</u>)
The amendment(s) was/were approved 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)
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 an 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)
Samuel L. Osborne
(Typed or printed name of person signing)
Pres
(Title of person signing)

FILING FEE: \$35

1 would like to amond to change the registered agent to Donald Shrum
3521 Macalay Blud
Tallahasse, #1.32312

I Donald Shrum understand and ogree to the responsibility as the registered agent.

Donald Shrum

Donald Ster