P000000 82694

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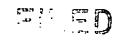
JUN - 3 2019

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: RV DOCTOR, IN	C
DOCUMENT NUMBER: P00000082694	
The enclosed Articles of Amendment and fee are su	abmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
STEPHEN MCGUIRE	
	Name of Contact Person
TOLL LAW	
	Firm/ Company
4600 SUMMERLIN RD, SU	JITE C-2 #536,
	Address
FORT MYERS, FL 33919	
	City/ State and Zip Code
stephen@matthewtoll.com	
	sed for future annual report notification)
is-man address. (to be ti	sed for future annual report nonneation)
For further information concerning this matter, pleas	se call:
STEPHEN MCGUIRE	at (239) 257-1743
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Department of State:
■ \$35 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (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

Articles of Amendment to Articles of Incorporation of



RV DOCTOR, INC.

2019 HAY 17 PH 12: 01

(Name	of Corporation as currently filed with	the Florida Dept. of State)	
P00000082694			76 . T
	(Document Number of Corporatio	n (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006. Florida Statutes, this <i>Florida Pro</i>	fit Corporation adopts the following a	imendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
	<u> </u>	<i></i>	he new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp." "Inc," or "Co". A pre	ny," or "incorporated" or the abbi ofessional corporation name must con	reviation ntain the
B. <u>Enter new principal office address,</u> (Principal office address <u>MUST BE A S</u>			
			 .
			
C. Enter new mailing address, if appl	icable:		
(Mailing address MAY BE A POST			
			
 If amending the registered agent ar new registered agent and/or the new 	d/or registered office address in Flori	da, enter the name of the	
	 		
Name of New Registered Agent	STEPHEN N. MCGUIRE II, ESQ.		
	20 BARKLEY CIR, STE 202		
	(Florida street address)	-	
New Registered Office Address;	FORT MYERS		
	(City)	(Zip Coa	le)
New Registered Agent's Signature, if c hereby accept the appointment as regist	hanging Registered Agent:	and the second of	
merco, accept me appointment as regist	erea agent. Tum jaminar wun anu acca	pt the obligations of the position.	
/\mathrew /\math	Van My hr		
7 9 1	Signature of New Registered As		

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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 = Chie Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each offic 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	<u>PT</u>	John Dog	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			-
Remove			
			•
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
_			
5) Change			
Add			
Remove			

	sheets, if necessary).	(Be specific)			
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an amendment i	provides for an exch	rango roclassificati	ion or consollation	se of ions all about	-
rovisions for im-	plementing the ame	ndment if not cont	sined in the amer	dment itself:	<u>es.</u>
(24)	ible, indicate N/A)		The state of the s	A COLUMN TO SECTION OF THE SECTION O	
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The date of each amendment(s) adoption:, if other than the date this document was signed.
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
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.
05/07/2019 Dated \
Signature 1
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)
JANICE M. AKARD
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)