## P00000100470

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SECRETARY OF STATE
DIVISION OF CORPORATION

FEB 1 7 2016 C LEWIS

## **COVER LETTER**

TO: Amendment Section

**Division of Corporations** Earth, Wind, Fire & Flood, Inc. NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Elton Webb Name of Contact Person Earth, Wind, Fire & Flood, Inc. Firm/ Company 6413 Land O Lakes Blvd. Address Land O Lakes, FL 34638 City/ State and Zip Code ecwebb007@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Elton Webb Area Code & Daytime Telephone Number Name of Contact Person 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 Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

Earth, Wind, Fire & Flood, Inc.			16 F	EB 16	PH 12: 44
(Name of Corporation	n as currently	filed with the Florida I	Dept. of State)		
P00000100470					
(Docume	ent Number of	Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this F	lorida Profit Corporatio	n adopts the fo	llowing	amendment(s)
A. If amending name, enter the new name of the con	rporation:				
				7	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the a	" "Inc," or "C	o". A professional corp		the abb	reviation
B. Enter new principal office address, if applicable:		<del></del>			
(Principal office address <u>MUST BE A STREET ADD</u>	<u>KESS</u> )				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	מ				
D. If amending the registered agent and/or registere new registered agent and/or the new registered o		ss in Florida, enter the	name of the		
Name of New Registered Agent	<u> </u>				
	(Florida stree	t address)			
New Registered Office Address:			, Florida	·	
	(0	City)		(Zip Co	de)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I		th and accept the obligat	tions of the pos	ition.	
Signa	ture of New Res	gistered Agent, if changing	ng		

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	<u>PT</u>	John De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	<u>s</u>		Barry Kinney	2410 Andaluscia Way NE
Add				St. Petersburg, FL 33704
Remove				
2) Change		_		
Add				
Remove				
3) Change	<u></u>	_		
Add				
Remove				
4) Change		<u> </u>		
Add				<del> </del>
Remove				
5) Change		<b></b>		
Add				
Remove				
6) Change		<del></del>		
Add				
Remove				

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
<u> </u>	
If an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/A) (ton Webb -100%	nange, reclassification, or cancellation of issued shares, and and an analysis
arry Kinney-0%	

The date of each amendmen date this document was signed	t(s) adoption:	·	, if other than the
Effective date if applicable:	02/0/2016	FILE SECLETARY DIVISION OF CO	Of sale
	(no more the	an 90 days after amendment file date)	<del>an una Ho</del> ms
Note: If the date inserted in document's effective date on t	this block does not meet the ap the Department of State's records	pplicable statutory filing requirements, this date wis.	PH 12: 44 Il not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
	re adopted by the shareholders. ere sufficient for approval.	The number of votes cast for the amendment(s)	
		through voting groups. The following statement d to vote separately on the amendment(s):	
	s cast for the amendment(s) was/	••	
by	(voting group)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)		
		tors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.  Dated Signature	re adopted by the incorporators of	without shareholder action and shareholder	
	y a director, president or other	officer – if directors or officers have not been	
SE	lected, by an incorporator - if in	n the hands of a receiver, trustee, or other court	
aj	ppointed fiduciary by that fiducia	ary)	
	Elton Webb		
	(Typed or print	ted name of person signing)	
	President		
		itle of person signing)	