P00000104134

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SECRETARY OF STAIL STAIL OF CORPORALICACION

SEP 1 3 2016 C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LIGHTSEEKER,	, INC.
DOCUMENT NUMBER: P00000104134	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.
Please return all correspondence concerning this matter	er to the following:
AMY J. GALL	OWAY
	Name of Contact Person
AMY J. GALLOWAY, P. A.	
	Firm/ Company
1401 EAST BROWARD BLV	D., SUITE 206
	Address
FORT LAUDERDALE, FL 33	3301
·	City/ State and Zip Code
	·
AMYJGALLOWAY@GMAIL.CON	
E-mail address: (to be use	d for future annual report notification)
For further information concerning this matter, please	call:
AMY J. GALLOWAY	315-4887
Name of Contact Person	at (954) 315-4887 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made pa	ayable to the Florida Department of State:
■ \$35 Filing Fee	□\$43.75 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



2016 AUG 29 AM 11: 36

(<u>Ivame of G</u>	Corporation as curren	tly filed with the Florida Dept. of State)
P00000104134		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.100 as Articles of Incorporation:	06, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment
. If amending name, enter the new name	e of the corporation:	
		The new
ame must be distinguishable and contain Corp.," "Inc.," or Co.," or the designati vord "chartered," "professional association	on "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
. Enter new principal office address, if a	onnlicable:	225 NW 44TH STREET
Principal office address <u>MUST BE A STREET ADDRESS</u>)		OAKLAND PARK, FL 33309
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		AGC NINI 44MIN GRID DEM
		225 NW 44TH STREET
(Mailing address MAY BE A POST OF	FICE BOX)	
(Mailing address <u>MAY BE A POST OF</u>	<u>FICE BOX</u>)	OAKLAND PARK, FL 33309
(Mailing address <u>MAY BE A POST OF</u>	FICE BOX)	OAKLAND PARK, FL 33309
	or registered office add	lress in Florida, enter the name of the
). <u>If amending the registered agent and/o</u> new registered agent and/or the new r	or registered office add	lress in Florida, enter the name of the
D. If amending the registered agent and/o new registered agent and/or the new r	or registered office addre	lress in Florida, enter the name of the
D. If amending the registered agent and/o new registered agent and/or the new r	or registered office addre egistered office addre /A	lress in Florida, enter the name of the
D. If amending the registered agent and/onew registered agent and/or the new registered agent and/or the new registered Agent No. 100	or registered office addre egistered office addre /A	lress in Florida, enter the name of the

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 Doe	
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) Cl			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

F. If an amendment provides for an 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) N/A	E. If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	N/A	
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	provisions for implementing the ame	endment if not contained in the amendment itself:
VA		
	I/A	



The date of each amendment(s) a	doption;	2016 AUG 29 or AM AL; 36
date this document was signed.	торноги.	The state of the s
Effective date <u>if applicable</u> :		
	(no more than 90 days after	amendment file date)
Note: If the date inserted in this idocument's effective date on the De		ry filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad- by the shareholders was/were st	opted by the shareholders. The number of officient for approval.	votes cast for the amendment(s)
	proved by the shareholders through voting reach voting group entitled to vote separate	
	for the amendment(s) was/were sufficient	for approval
by	(voting group))+
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without aba	reholder action and shareholder
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareho	lder action and shareholder
08/26/20	16	
DatedSignature	Coseans) No	inet
(By a c	firector, president or other office. If directed, by an incorporator — if in the hands of a sted fiduciary by that fiduciary)	
	Roseann A. Minnet	
	(Typed or printed name of per	son signing)
	PSTD	
	(Title of person si	gning)