## P01000041547

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Amend -12-11/1 10-5-11

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION:	J. GARRETT,	INC.	
DOCUMENT NUMBER:		P0100004	1547	
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.		
Please return all co	orrespondence concerning th	is matter to the following:		
		JULIA R. LAW		
1		Name of Contact Person		
	RO	BERTS & LAW, P.A.		
		Firm/ Company		
	P.O. BOX 57 Address			
		·· .		
-		OVELAND, FL 34736		
		City/ State and Zip Code		
	E-mail address: (to be use	ed for future annual report notifi	cation)	
	· .	,	,	
For further inform	ation concerning this matter,	please call:		
	Julia R. Law	at ( 352 )	429-2183	
Name	e of Contact Person	Area Code & Day	429-2183 viime Telephone Number	
Enclosed is a chec	k for the following amount n	nade payable to the Florida	a Department of State:	
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is en	\$52.50 Filing Fee Certificate of Status Closed) Certified Copy (Additional Copy is enclosed)	
Mailing Address		Street Address		
Amendme		Amendment Section		
Division of Corporations		Division of Corporat	ions	
P.O. Box 6327		Clifton Building		
Tallahasse	FI 32314	2661 Executive Cent	er Circle	

Tallahassee, FL 32301

## **Articles of Amendment** of

2011 OCT 3 AM 8:39
ALLAHASSEE FISIALE. **Articles of Incorporation** J. GARRETT, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P01000041547 (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

nme must be distinguishable and contain tobreviation "Corp.," "Inc.," or Co.," or the ume must contain the word "chartered," "proj	designation "Corp," "Inc," or "C	o". A professional corpor
Enter new principal office address, if appler of the principal office address MUST BE A STREE		
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		
If amending the registered agent and/or renew registered agent and/or the new regis		a, enter the name of the
If amending the registered agent and/or renew registered agent and/or the new registered Agent:	egistered office address in Florida	a, enter the name of the
new registered agent and/or the new regis	egistered office address in Florida	
new registered agent and/or the new regis  Name of New Registered Agent:	egistered office address in Florida tered office address:	, Florida

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	JOSHUA G. WALSH	132 South Highway 33 Groveland, FL 34736	
<del></del>			
	<del></del>		
	ding or adding additional Articles, end dditional sheets, if necessary). (Be sy		
provisi	mendment provides for an exchange, ons for implementing the amendmen not applicable, indicate N/A)		
	·		<del>-,</del>

The date of each amendmen	t(s) adoption:	7/1/11
Effective date if applicable:	7/1/11	(date of adoption is required)
	(no more that	n 90 days after amendment file date)
Adoption of Amendment(s)	((	CHECK ONE)
The amendment(s) was/we by the shareholders was/w		the shareholders. The number of votes cast for the amendment(s) or approval.
		the shareholders through voting groups. The following statementing group entitled to vote separately on the amendment(s):
"The number of votes	cast for the am	endment(s) was/were sufficient for approval
by	(voting group)	,"
action was not required.		the board of directors without shareholder action and shareholder the incorporators without shareholder action and shareholder
Dated 9/30	)/11	
sele	ected, by an inc	sident or other officer – if directors or officers have not been corporator – if in the hands of a receiver, trustee, or other court by by that fiduciary)
		GLENN WALSH
	("	Typed or printed name of person signing)
		PSTD
	(Title	e of person signing)