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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: CHAMPION OF I	FR. LAUDERDALE, INC	
DOCUMENT NUMB	P01000076083		
The enclosed Articles of	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	pondence concerning this ma	itter to the following:	
	JAMES F. JIAMPETTI		
	-	Name of Contact Person	1
-		Firm/ Company	
	1333 NW 10TH STREET		
•		Address	
	DANIA BEACH, FLORIDA	33004	
-	<u> </u>	City/ State and Zip Cod	e
JJCH	AMPI@YAOO.COM		
	E-mail address; (to be u	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
JAMES F JIAMPETT	I	at (
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address indment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

CHAMPION OF FT. LAUDERDALE INC

17 AUG 30 AM 10: 24

	on as currently filed with the Florida Ment. 为[State] 在 自動作的点
P01000076083	
(Docume	ent Number of Corporation (if known)
tursuant to the provisions of section 607.1006, Florida is Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the cor	rporation:
	The new
	I "corporation," "company," or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDI</u>	<u>RESS</u>)
Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	<u> </u>
N 16 17 18 18 18 18 18 18 18 18 18 18 18 18 18	
 If amending the registered agent and/or registere new registered agent and/or the new registered o 	
Name of New Registered Agent	
Name of New Registered Agent	
	(Florida street address)
N D : 100 111	
New Registered Office Address:	, Florida (City) (Zip Code)
	,
iew Registered Agent's Signature, if changing Regis	stered Agent: I am familiar with and accept the obligations of the position.
петеоу ассері іне арронишені as registerea agent. 1	ат јатича жин ина иссери те оонданонк ој те рохинон.
Signa	iture of New Registered Agent, if changing

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.

X Change	<u>PT</u> <u>John</u>	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e_Jones	
<u>X</u> Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	ST	JIAMPETTI, JOSEPH P	1333 NW 10TH STREET
Add			DANIA BEACH, FL 33004
X Remove			
2) Change	D	JIAMPETTI, JOSEPH M	1811 ABBEY ROAD
Add			WEST PALM BEACH, FL 33415
X Remove			
3) Change	VP	MORSE, REBECCA A	1333 NW 10TH ST
X Add			DANIA BEACH, FLORIDA 3306
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f 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)	famending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
provisions for implementing the amendment if not contained in the amendment itself:		
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(if not applicable, indicate N/A)	f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
	(if not applicable, indicate N/A)	numerical in the amendment lisen.
	.	

The date of each amendment date this document was signed.	s) adoption:, if other than th
Effective date <u>if applicable</u> :	MAY 26, 2017
Effective date it appricable.	(no more than 90 days after amendment file date)
	his block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement l 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
JAMES JIAMPE	TI
<u> </u>	(voting group)
☐ The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
08/25/	2017
Dated	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	JAMES JIAMPETTI
	(Typed or printed mane of person signing)
	, (Title of person signing)