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Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPO	RATION: JW Bryant INC		
DOCUMENT NUMI	BER: P102000010717		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Joseph L Martino		
		Name of Contact Persor	1
	JW Bryant INC		
		Firm/ Company	
	1165 East Duval St		
		Address	
	Lake City FL 32055		
		City/ State and Zip Cod	2
jwbry	/antine@gmail.com		
<u> </u>	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Joe Martino		at (7520491
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	urtment of State:
\$35 Filing Fee	☐S43.75 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)
Mailing Address			Address
Amendment Section			ment Section
Division of Corporations		Division of Corporations	

Articles of Amendment to Articles of Incorporation

of

Ju Bryant Inc	
(Name of Corporation as current	lly filed with the Florida Dept. of State)
h05000010-11-1	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation"Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	FILED SEP 21 M
D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	. Florida
wer negative comments.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Signature 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	v	Eva M. Martino	144 SW Hancock Ct
X Add			Lake City FL 32055
Remove			
2) Change			
Add			
Remove			
3.) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
 ,		
, pa , pa		
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
у погарунских, такие пял		
су посирунскоге, такие полу		·.,
су посирунскоге, такие пол		
уд пол ирранияле, тиние пол		
уд пол царничале, такие пол		
vy ma uppawane, mawaw iva)		
у пострукция, также полу		
у по прутичения под		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
	September 19, 2017	
Effective date <u>if applicable</u> :		
	tno more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date we Department of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were 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 d 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		
	(voting group)	
action was not required. The amendment(s) was/were	e adopted by the board of directors without shareholder action and shareholder e adopted by the incorporators without shareholder action and shareholder	
action was not required.		
09/19/	2017	
Dated		
Signature _/	1 of 1 parties	
y' se	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Joseph L Martino	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	