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(Re	questor's Name)	
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(Cit	ty/State/Zip/Phone	<u> </u>
PICK-UP	MAIT	MAIL
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(Do	ocument Number)	
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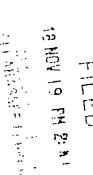
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COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporat	tions			
NAME OF CORPORATIONAL DOCUMENT NUMBER	002000	+ FNC.		
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.		
Please return all correspon	ndence concerning this ma	tter to the following:		
	Curtis 1	Weatherall		
	accuart	Name of Contact Person)	
	3730 W. (WHWY 30:	<u>A</u>	
Santa Rosa Brach, F1 32459				
	E-mail address: (to be us	City/ State and Zip Code Cr + 30a. Covered for future annual report	Υ /	
For further information co	oncerning this matter, pleas	se call:		
Curtis W	eatherall	a(850_	419 - 3963 de & Daytime Telephone Number	
Name of C	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for th	e following amount made p	payable to the Florida Depa	rrtment 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)	
Mailin	g Address	Street	Address	

Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Autio	to Hes of Incorporation
Arne	of
Uccuart INC	
(Name of Corporation as	currently filed with the Florida Dept. of State)
PO 200	DO054084
(Document N	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpor	ation:
	The new
	orporation," "company," or "incorporated" or the abbreviation nc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	3730 W. CO Hwy 30A Santa Rosa Beach, F1 32459
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3730 W. Co Hwy 30A Santa Rosa Beach, F1 32459
D. If amending the registered agent and/or registered or new registered agent and/or the new registered office	
Name of New Registered Agent	
	Florida street address)
Non Designand Office Address	Florida 52 5
New Registered Office Address:	(City) Florida (Zip Code)
New Registered Agent's Signature, if changing Register Thereby accept the appointment as registered agent. Tam	ed Agent:

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 De	<u>De</u>	
X Remove	<u>V</u>	Mike Jo	one <u>s</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
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) Change				
Add	•	_		•
Remove				
0				
6) Change		_		
Add				
Damaira				

	ding additional Articles, if necessary).	cles, enter change(s) here: (Be specific)
		(ve specific)
	 _	
9 m .com		
an amendment provides f	for an aval	
(if not any f	g the amend	lassification, or cancellation of issued shares, not contained in the amendment itself:
y wa applicable, indica	ite N/A)	not contained in the amount of issued shares.
	,	anichament itself:

The date of each amendment(s) adop	otion:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		, , , , , , , , , , , , , , , , , , ,
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blockdocument's effective date on the Depa	ck does not meet the applicable statutory filing requirements, rtment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the amend cient for approval.	ment(s)
	ved by the shareholders through voting groups. The following such voting group entitled to vote separately on the amendment(s	
"The number of votes cast for	r the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shar	eholder
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and sharehol	der :
Dated 114	2018	
Signature	THE WEATHERA,	
Hy a dire	ctor, president or other officer – if directors or officers have not	been
selected,	by an incorporator - if in the hands of a receiver, trustee, or other	
appointed	I fiduciary by that fiduciary)	
_	(Typed or printed name of person signing)	
	Masidant	
	(Title of person signing)	
	(citie or person arguing)	