## P02000009470

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SECRETARY OF STATE

Amend

APR 21 2017

ALBRITTON

## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations HAME OF CORPORATION: RAY PARSON ENTERPRISES, INC. DOCUMENT NUMBER: <u>70</u> 2 0006 69470 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person

RAY PARSON ENTERNEISES INC

Firm/ Company

314 FLAMINGO DE

Address

Apollo BEACH PL 33572

City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (8/3) 863-8786 Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

RAY PARSON Enterprists I	nc
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P020000 69470	
(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:	
N/A	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)	THE SECTION
D. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office address	_
Name of New Registered Agent ALEXANDER	A. Ruiz
1716 E. Poins	A. Ruiz Setila Ave TAMPA FC 33612 reel address)
New Registered Office Address: 1/12	. Florida
New registered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar to  Signature of Nav. Is	with and accept the obligations of the position.
Signature of New L	Degistered 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	PT Jo	ohn Doe	
X Remove	<u>v</u> <u>w</u>	like Jones	
X Add	<u>SV</u> S	ally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
ı, cnange	· 7.	ALEXANDER A. RUIZ	TAMPA, FL 33612
Add			TAMPA, FL 33612
Remove			
2) Change	<del></del>		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
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	necessary). (Be specij	change(s) here: fic)		
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			tion of issued shares,	
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nn amendment provides rovisions for implementi (if not applicable, indic	ing the amendment if n	ssification, or cancella ot contained in the am	endment itself:	
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an amendment provides rovisions for implementi  (if not applicable, indic	ing the amendment if n	ssincation, or cancella of contained in the am	endment itself:	

THE date at each amendmenus; adoption:	04/17	2017	(n/n?)	, it other than the
date the accument was struct.				
Effective date <u>11 approxime</u> .				
	(no more than Yu	aays ajier amenan	neni jire uure)	
Note: If the date inserted in this block does in confident's effective date on the Department of		ole statutory niing	requirements, this date wi	iii not be listed as the
Adoption of Amendment(s) (CI	ur.			
☐ The amendment(s) was/were adopted by the by the snareholders was/were sufficient for		number of votes ca	st for the amendment(s)	
☐ The amendment(s) was/were approved by the must be separately provided for each volume.			- <del>-</del>	
"The number of votes cast for the ame		sufficient for appr	oval	
Q ···	oting group)		······································	
I ne amenament(s) was/were adopted by the action was not required.	poard of directors w	ritnout snarenoider	action and Shareholder	
The amendment(s) was/were adopted by the	incorporators withou	ut shareholder action	on and shareholder	
action was not required.	•			
Datec_4/17/20/	7			
Signature Canal	Corsu			
			fficers have not been , trustee, or other court	
	y by that fiduciary)	iands of a receiver	, trustee, or other coun	
RAYN	NOND PARS (Typed or printed na	00		
7	(Typed or printed na	me of person signi	ng)	
PRE	SIDENT			
•	(Title of	nerson signing)	<del> </del>	- <del></del>