P0200074132

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SECRETARY OF THE TAIL

APPROVED

C. LEWIS

JUN 1 8 2014

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations	t
NAME OF CORPORATION: Anjo of	Skylake, inc.
DOCUMENT NUMBER: POZOCOC	i de la companya de
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this r	natter to the following:
Diana	Name of Contact Person
•	•
Anjo o	f Skylake, M.C.
	Military Tr
Lake W	City State and Zip Code
E-mail address: (to be	used for future annual report notification)
Name of Contact Person	at (5(0)) 600 - 4(008) Area Code & Daytime Telephone Number
	• • •
Enclosed is a check for the following amount made	le payable to the Florida Department of State:
\$35 Filing Fee Status Status	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

APPROVED AND FILED

14 JUN -6 PH 4: 57

to SECRETARY Dr. of the little of the second
Articles of Incorporation TALL ANALYSIS AND ANALYSIS ANALYSIS AND ANALYSIS ANALYSIS AND ANALYSIS ANALYSIS AND ANALYSIS ANALYSIS ANALYSIS ANALYSIS ANALYSIS ANALYSIS ANALYSIS A
Anjo of Skylake, Inc. (Name of Corporation as currently filed with the Florida Dept. of State)
P02000074132
(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:
A. If amending name, enter the new name of the corporation:
The new
name must be distribuishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address; if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mulling address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the
new registered agent and/or the new registered office address:
Name of New Registered Agent MOTOCES HOTHOUG GIRCGES D
10 Far Way Dive Suite 302
New Registered Office Address: DCET FIELD BECCON Florida 3344 (City) (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. Lain familiar with and accept the obligations of the position.
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> <u>Jol</u>	hn Doe	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>P</u> _	Artemik, Angela K.	550 skylate pr. West Palm Beach,
Add Remove	_		FL 33415
2) Change	<u>S</u>	Artemik, John M.	550 skylake Dr. West Palm Beach,
Remove 3) Change	CED	Guerriero, Thomas A.	FL 33415.
Add Remove			SUHE 302 Deerfield Bch,FL 33941
4) Change	000	Lovera, Diana	10 Fairway Drive Suite 302
Remove			Deerfield Bch, FL 334
5) Change			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Artic ttach additional sheets, if necessary).	(Be specific)	
an amendment provides for an excharovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:	
		<u> </u>



The date of each amendment(s) adoption:	14 JUN -6 PM 4: 57	, if other than the
date this document was signed.	SECRETARY OF STATE TALE AHASSES TO ORDA	
Effective date if applicable: (no more the	an 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by the shareholders. by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)	
The amendment(s) was/were approved by the shareholders must be separately provided for each voting group entitled		
"The number of votes cast for the amendment(s) was	/were sufficient for approval	
by(voting group)	,,,	
(voting group)		
The amendment(s) was/were adopted by the board of direct action was not required.	ctors without shareholder action and shareholder	
The amendment(s) was/were adopted by the incorporators action was not required.	without shareholder action and shareholder	
Dated6/3/2014		
Signature Angula K.	artemil	
	officer - if directors or officers have not been	
selected, by an incorporator — if i appointed fiduciary by that fiduci	in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduci	ary)	
HNGEL,	A K ARTEMIK	
(Typed	or printed name of person signing)	
PRESIDE	ent	_
·	(Title of person signing)	