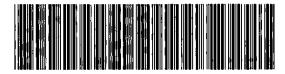
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TALLAHASSEE, FLORIDA

Amenda

### **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION:TO	ORRANCE ENTERPRISES, INC.
DOCUMENT NUM	BER:	P02000080870
The enclosed Articles	s of Amendment and fee a	re submitted for filing.
Please return all corre	espondence concerning thi	s matter to the following:
		TONIA BRITT
	N	ame of Contact Person
	TORRAN	CE ENTERPRISES, INC.
		Firm/ Company
	100	DUBBS STREET
_		Address
	UN	MATILLA; FL 32784
	С	ity/ State and Zip Code
	Olsor E-mail address: (to be use	nins@lcia.com d for future annual report notification)
For further information	on concerning this matter,	please call:
т	ONIA BRITT	at ( 352 ) 669-1264
Name of	Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check f	or the following amount m	nade payable to the Florida Department of State:
☑ \$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclose
Mailing Add		Street Address Amendment Section
Amendment Section Division of Corporations		Amendment Section Division of Corporations
P.O. Box 6327		Clifton Building
Tallahassee, FL 32314		2661 Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment** to Articles of Incorporation of

# TORRANCE ENTERPRISES, INC. (Name of Corporation as currently filed with the Florida Dept. of State)

### P02000080870

(Document Number of Corporation (if known)

amendment(s) to its Articles of Incorporation  A. If amending name, enter the new name	e of the corporation:	
,		The new
name must be distinguishable and conta abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," "	the designation "Corp," "Inc," or "C	ny," or "incorporated" or the
B. Enter new principal office address, if a		
(Principal office address <u>MUST BE A STR</u>	REET ADDRESS )	
	<del></del>	<del></del>
	·	
C. Enter new mailing address, if applica		
(Mailing address <u>MAY BE A POST OF</u>	FICE BOX)	
		·
D. If amending the registered agent and/		, enter the name of the
new registered agent and/or the new r		•
new registered agent and/or the new r	TONIA BRITT	
new registered agent and/or the new r	10/1/2/0/11/1	
Name of New Registered Agent:	111 N CENTRAL AVE	
Name of New Registered Agent:	111 N CENTRAL AVE	 , Florida 32784

# 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
PD	RODNEY TORRANCE	47535 HIBISCUS ROAD ALTOONA. FL 32702	
<del></del>			
(attach add	itional sheets, if necessary). (Be spec	rific)	
	, , , , , , , , , , , , , , , , , , ,		
<u>provision</u> :	ndment provides for an exchange, rest of implementing the amendment in applicable, indicate N/A)	classification, or cancellation of f not contained in the amendme	'issued shares, nt itself:

The date of each amendment(s) a	doption:	
	(date of adoption is required)	
Effective date if applicable: (no more than 90 days after amendment file date)		
(		
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad by the shareholders was/were so	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement 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	.,,	
(vot	ing group)	
The amendment(s) was/were ad action was not required.	lopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adaction was not required.	lopted by the incorporators without shareholder action and shareholder	
Dated_06/01/20	010	
Signature	nia a brit	
selected	rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	TONIA BRITT	
_	(Typed or printed name of person signing)	
	PRESIDENT	
_	(Title of person signing)	