## Pnao107932

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Total Sleep Ma NAME OF CORPORATION:	inagement Inc
DOCUMENT NUMBER: P02000107932	
The enclosed Articles of Amendment and fee are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
Nicholas L. Holland	
	Name of Contact Person
Total Sleep Management	Inc
323 CHURCHILL DOW	Firm/ Company NS BLVD
DELAND, FL 32724	Address
	City/ State and Zip Code
emery.tsm@yahoo.com	į.
E-mail address: (to b	e used for future annual report notification)
For further information concerning this matter, p	blease call:
Nicholas L. Holland	407 319-4231
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	ade payable to the Florida Department of State:
\$35 Filing Fee Certificate of Statu	
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

## Articles of Amendment to Articles of Incorporation of

Total Sleep Management, Inc.	
	filed with the Florida Dept, of State)
1902000107932	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this $Fl$ its Articles of Incorporation:	orida 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 "Co	" "company," or "incorporated" or the abbreviation  O". 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)	स्टा क
	m m
C. Enter new mailing address, if applicable:	50 <b>u</b>
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	<u>ာ သုံ့</u>
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
Name of New Negistered Agent	
(Florida stree	(address)
New Registered Office Address:	, Florida
	ity) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.
Signature of New Reg	istered 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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	T	Jean E. Arthur	17715 se 294th Court Rd
Add			Umatilla, Fl. 32784
X Remove			
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			<del></del>
5) Change	<del></del>		
Add			
Remove			
6) Change			
Add			
Remove			

<u> </u>		
an amendment provides for an excharge the ame	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	nument is not contained by the amendment user.	
	17/14.1	
<del></del>		

	July 31, 2017	
The date of each amendment(s): date this document was signed.	adoption:	_, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the f	block does not meet the applicable statutory filing requirements, this date will Department of State's records.	not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ac by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were acaction was not required.	dopted by the incorporators without shareholder action and shareholder	
August 9	. 2017	
Dated	Int Hallun	
	director, president or other officer - if directors or officers have not been	_
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
-rr	Nicholas L. Holland	
	(Typed or printed name of person signing)	<del></del>
	VP	
	(Title of person signing)	