## P03000004638

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(Business Entity Name)			
(Document Number)			
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Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## **COVER LETTER**

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: M.R. Crafts, In	c.				
DOCUMENT NUMBER: P03000004638					
The enclosed Articles of Amendment and fee are	e submitted for filing.				
Please return all correspondence concerning this	matter to the following:				
John Purland					
	Name of Contact Person	n			
M.R. Crafts, inc.					
	Firm/ Company				
2234 N. Federal Hwy, #3-	49				
<del></del>	Address				
Boca Raton, FL 33431					
	City/ State and Zip Cod	e			
johnpurland@gmail.com					
E-mail address: (to b	e used for future annual report	notification)			
For further information concerning this matter, p	lease cail:				
Daniela Amoroso	aı ( <sup>954</sup>	461-4002			
Name of Contact Person	Area Co	dc & Daytime Telephone Number			
Enclosed is a check for the following amount ma	ide payable to the Florida Depa	artment of State:			
\$35 Filing Fee S43.75 Filing Fee Certificate of Statu		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address		Address			

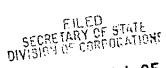
Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

## Articles of Amendment to Articles of Incorporation of



16 MAR -9 PM 1: 35

(Name of C		16 MAR -7	
P03000004638	orporation as current	y filed with the Florida Dept. of State)	
1 03,000004036		60 1 100	
	(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607,100 its Articles of Incorporation:	06, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new name	of the corporation:		
		The new	
	on "Corp," "Inc," or "	n," "company," or "incorporated" or the abbreviation Co". A professional corporation nume must contain the P.A."	
B. Enter new principal office address, if a	npplicable:	2840 NW 2nd Ave, Ste. 203	
(Principal office address <u>MUST BE A STR</u>		Boca Raton, FL 33431	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2234 N. Federal Hwy, #349	
		Boca Raton, FL 33431	
D. If amending the registered agent and/o new registered agent and/or the new r			
	hn Purland	<u>.</u>	
• • • • • • • • •	340 NW 2nd Ave, Ste. 20	93	
_	(Florida street address)		
New Registered Office Address:	ea Raton	. Florida	
New Registered Office Address.		(City) (Zip Code)	

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 Joh</u>	n Doe		
X Remove	<u>V</u> <u>Mik</u>	Mike Jones		
X Add	SV Sall	y Smith		
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
1) Change	VP	Kristen Nevils	7777 Davie Rd. Ext., #302A-3	
Add XRemove			Hollywood, FL 33024	
2) Change	Presiden	John Purland	2234 N. Federal Hwy, #349	
XAdd			Boca Raton, FL 33431	
Remove				
·3)Change				
Add			4.4.1.11.1	
Remove				
4) Change		·		
Add				
Remove				
5) Change	<del></del>			
Add				
Remove				
6) Change				
Add				
Remove				

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f an amendment or	ovides for an excl	ange, reclassific	ation, or cancellat	tion of issued shar	es.
<u>provisions for impi</u>	ementing the ame	iange, reclassific adment if not co	ation, or cancellat ntained in the am	tion of issued shar endment itself:	<u>es.</u>
<u>provisions for impi</u>	rovides for an exclementing the ame	nange, reclassificendment if not co-	ation, or cancellar ntained in the am	tion of issued shar endment itself:	<u>es.</u>
<u>provisions for impi</u>	ementing the ame	nange, reclussific adment if not co	ation, or cancellar ntained in the am	tion of issued shar endment itself;	<u>es.</u>
<u>provisions for impi</u>	ementing the ame	hange, reclassific adment if not co	ation, or cancellar ntained in the am	tion of issued shar endment itself:	es. 
<u>provisions for impi</u>	ementing the ame	hange, reclassific adment if not co	ation, or cancellar otained in the am	tion of issued shar endment itself:	es, 
<u>provisions for impi</u>	ementing the ame	hange, reclassific andment if not co	ation, or cancella ntained in the am	tion of issued shar endment itself:	<u>es.</u>
<u>provisions for impi</u>	ementing the ame	hange, reclassific endment if not co	ation, or cancellar ntained in the am	tion of issued shar endment itself:	es.
<u>provisions for impi</u>	ementing the ame	hange, reclassific adment if not co	ation, or cancellar ntained in the am	tion of issued shar endment itself:	es,
<u>provisions for impi</u>	ementing the ame	hange, reclassific endment if not co	ation, or cancella ntained in the am	tion of issued shar endment itself:	ES.
<u>provisions for impi</u>	ementing the ame	hange, reclassific adment if not co	ation, or cancellar ntained in the am	tion of issued sharender itself;	es.
f an amendment or provisions for impl (if not applicab	ementing the ame	nange, reclussific indment if not co	ation, or cancellar	tion of issued shar endment itself:	es,
<u>provisions for impi</u>	ementing the ame	nange, reclassific endment if not co	ation, or cancellas	tion of issued sharendment itself;	ES.

	12/14/2015		
The date of each amendment(s) a	doption:		if other than the
date this document was signed.		И.Т ПАТИВОЛЬ	TOF STATE
12/	14/2015	SECRE WA	Y OF STAILS CORPORATIONS
Effective date if applicable:			
	(no more th	han 90 days after amendment file date 16 MAR -C	7 PM 1:35
Note: If the date inserted in this document's effective date on the D		applicable statutory filing requirements, this date wids.	rill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
The amendment(s) was/were ad by the shareholders was/were st		. The number of votes east for the amendment(s)	
		s through voting groups. The following statement of to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was	s/were sufficient for approval	
by		n	
	(voting group)		
The amendment(s) was/were ad action was not required.	opted by the board of direct	ctors without shareholder action and shareholder	
The amendment(s) was/were adaction was not required.	opted by the incorporators	s without shareholder action and shareholder	
March 11t Dated	h, 2016		
Signature	APeQ	2 _	
	lirector, president or other	officer - if directors or officers have not been	<del></del>
		in the hands of a receiver, trustee, or other court	
	ited fiduciary by that fiduc		
	Y. L. D. L. L		
	John Purland		
	(Typed or prin	nted name of person signing)	
	President		
	(7	Fitle of person signing)	