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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
_	<u> </u>	_
(Bu	isiness Entity Nam	e)
(Do	ocument Number)	e
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MIC	HAGL J NAL	DZAM IN	1 <u>C</u>
DOCUMENT NUMB	er: <u>P</u> 03	0000 2847	14	
The enclosed Articles of	f Amendment and fee are su	abmitted for filing.		
Please return all corresp	ondence concerning this ma	atter to the following:		
_	MICHA	EL NAO	ZAM	·
		Name of Contact Person	on	_
•	CONT	INENTAL	PLUMBIN	6
_	P.0	Name of Contact Person NENTAL Firm/ Company Box	2755	
	TARPO	Address SPRING City/ State and Zip Co	is FL	34688
<u>-</u>		City/ State and Zip Co	de	
	CONTINPL	Sed for future annual report	AIL. COM	***************************************
For further information	concerning this matter, pleas	se call:	·	
		at ()	
Name of	Contact Person	Area C	ode & Daytime Teleph	one Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	partment of State:	
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Sta Certificate Copy (Additional Copy is enclosed)	utus
Amer Divisi P.O. I	ng Address dment Section on of Corporations Box 6327 nassee, FL 32314	Amen Divisi Clifto 2661	t Address adment Section ion of Corporations an Building Executive Center Circl hassee, FL 32301	e

Articles of Amendment to Articles of Incorporation

of	-
MICHAEL JN.	adzam inc
(Name of Corporation as currently filed with the Flor	rida Dept, of State)
Po 30000	28474
(Document Number of Corporation (if k	nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Statutes, the Florida	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 "Coword "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	MA
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	~/A
D. If amonding the registered event and/on registered effice address	
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	MA
(Florida street	address)
·	
New Registered Office Address:(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
New Registered Agent's Signature, it changing Registered Agent. I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the position.
	~/ L 701
Signature of New Registered Age	

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 <math>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.

X Change	<u>PT</u>	John Doe	
X Remove	¥	Mike Jones	
_ <u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P	MICHAEL J NADZAM	HOLIDAY, FL
<u></u> ⊁Add			HOLIDAY , FL
Remove			34690
2) Change		_	
Add			
Remove			
3) Change			
Add			-
Remove			
4) Change		.	
Add			
Remove			
5) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
6) Change			
Add		·	
Remove			

amending or adding additional Artitional Artitional Artitional sheets, if necessary).	(Be specific)
	4/4
,	
	
	
f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
	М/Ь
- 100	

The date of each amendment(s) adoption:	6-4-12
Effective date if applicable:	M/+
	(no more than 90 days after amendment file date)
Adoption of Amendment(s) (9	CHECK ONE)
The amendment(s) was/were adopted by to by the shareholders was/were sufficient for	he shareholders. The number of votes cast for the amendment(s) or approval.
	the shareholders through voting groups. The following statement ing group entitled to vote separately on the amendment(s):
"The number of votes cast for the an	nendment(s) was/were sufficient for approval
by	voting group) ."
☐ The amendment(s) was/were adopted by the action was not required.	he board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	he incorporators without shareholder action and shareholder
Dated	-4-13
Signature (By a director, pr	resident or other officer – if directors or officers have not been
selected, by an in	ncorporator — if in the hands of a receiver, trustee, or other court ary by that fiduciary)
	MICHAEL J NADZAM
	(Typed or printed name of person signing)
*****	REGISTERED AGENT
	(Title of person signing)