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| (Re                     | questor's Name)   |      |
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| PICK-UP                 | ☐ WAIT            | MAIL |
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

| NAME OF CORPOR                    | JP SNYDER, INC<br>RATION:                   |                                                                    |                                                                                        |
|-----------------------------------|---------------------------------------------|--------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| DOCUMENT NUME                     | P03000047760                                |                                                                    |                                                                                        |
| The enclosed Articles             | of Amendment and fee are su                 | bmitted for filing.                                                |                                                                                        |
| Please return all corres          | spondence concerning this ma                | tter to the following:                                             |                                                                                        |
|                                   | JEFFREY P SNYDER                            |                                                                    |                                                                                        |
|                                   |                                             | Name of Contact Person                                             |                                                                                        |
|                                   | JP SNYDER, INC                              |                                                                    |                                                                                        |
|                                   | 3438 EAST LAKE ROAD S                       | Firm/ Company<br>UITE 14-672                                       |                                                                                        |
|                                   | PALM HARBOR, FL 34685                       | Address                                                            |                                                                                        |
|                                   | <u> </u>                                    | City/ State and Zip Cod                                            | e                                                                                      |
| JEFF                              | @JPSNYDER.COM                               |                                                                    |                                                                                        |
|                                   | E-mail address: (to be us                   | sed for future annual report                                       | notification)                                                                          |
| For further information           | n concerning this matter, pleas             | se call:                                                           |                                                                                        |
| JEFFREY P SNYDEF                  | ₹                                           | 727<br>at (                                                        | 683-1730                                                                               |
| Name o                            | of Contact Person                           | Area Co                                                            | de & Daytime Telephone Number                                                          |
| Enclosed is a check fo            | r the following amount made                 | payable to the Florida Depa                                        | nrtment of State:                                                                      |
| \$35 Filing Fee                   | ☐\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address Amendment Section |                                             |                                                                    | Address<br>Iment Section                                                               |
|                                   | sion of Corporations                        |                                                                    | on of Corporations                                                                     |
| P.O.                              | Box 6327                                    | Clifton                                                            | Building                                                                               |
| Tallahassee, FL 32314             |                                             | 2661 E                                                             | Executive Center Circle                                                                |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

of JP SNYDER INC (Name of Corporation as currently filed with the Florida Dept. of State) P03000047760 (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: name must be distinguishable 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: (Mailing 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 (Florida street address) New Registered Office Address: (Citv) 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 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:                   | e, ana sai  | ty oman, i    | ov as an Ada.   |                 |
|----------------------------|-------------|---------------|-----------------|-----------------|
| X Change                   | <u>PT</u>   | John Do       | <u>c</u>        |                 |
| X Remove                   | V           | Mike Jo       | nes             |                 |
| <u>X</u> Add               | <u>sv</u>   | Sally Sn      | <u>nith</u>     |                 |
| Type of Action (Check One) | Title       |               | Name            | <u>Addres</u> s |
| 1)Change                   | V           | _             | JUDITH J SNYDER |                 |
| Add                        |             |               |                 |                 |
| X Remove                   |             |               |                 | <del></del>     |
| 2) Change                  |             |               |                 |                 |
| Add                        |             |               |                 |                 |
| Remove                     |             |               |                 |                 |
| 3) Change                  |             |               |                 |                 |
| Add                        | <del></del> |               |                 |                 |
| Remove                     |             |               |                 |                 |
| 4) Change                  |             |               |                 |                 |
|                            |             | _             |                 |                 |
| Add                        |             |               |                 |                 |
|                            |             |               |                 |                 |
| 5) Change                  |             |               |                 |                 |
| Add                        |             |               |                 |                 |
| Remove                     |             |               |                 |                 |
| 6) Change                  |             |               |                 |                 |
| Add                        |             | <del></del> - |                 |                 |
| Add                        |             |               |                 |                 |
| KCHIOVU                    |             |               |                 |                 |

| If amending or adding additional Articles, (Attach additional sheets, if necessary). (Be | e specific)                                            |
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|                                                                                          |                                                        |
| If an amandment provider for an avabance                                                 | e, reclassification, or cancellation of issued shares, |
| provisions for implementing the emendment                                                | ent if not contained in the amendment itself:          |
| (if not applicable, indicate N/A)                                                        | the in not contained in the antenument usen.           |
|                                                                                          | 7.1.175                                                |
| DITH J SNYDER SHARES WERE CANCE                                                          | 1.1.1.1.D.                                             |
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| date this document was signed.                                           | doption:, if other than t                                                                                                                    |
|--------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| Effective date if applicable:                                            | (no more than 90 days after amendment file date)                                                                                             |
|                                                                          | (no more than 90 days after amendment file date)                                                                                             |
| Note: If the date inserted in this bedocument's effective date on the Do | clock does not meet the applicable statutory filing requirements, this date will not be listed as a partment of State's records.             |
| Adoption of Amendment(s)                                                 | ( <u>CHECK ONE</u> )                                                                                                                         |
| The amendment(s) was/were add<br>by the shareholders was/were su         | opted by the shareholders. The number of votes east for the amendment(s) fficient 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                                                                       | (voting group)                                                                                                                               |
|                                                                          | (voting group)                                                                                                                               |
| ☐ The amendment(s) was/were add action was not required.                 | opted by the board of directors without shareholder action and shareholder                                                                   |
| ☐ The amendment(s) was/were add action was not required.                 | opted by the incorporators without shareholder action and shareholder                                                                        |
| 06/07/2018                                                               | 3                                                                                                                                            |
| Dated                                                                    |                                                                                                                                              |
|                                                                          | L. St. OA                                                                                                                                    |
| Signature                                                                | ikector, president or other officer – if directors or officers have not been                                                                 |
| selegre                                                                  | d, by an incorporator – if in the hands of a receiver, trustee, or other court                                                               |
|                                                                          | ted fiduciary by that fiduciary)                                                                                                             |
|                                                                          | JEFFREY P SNYDER                                                                                                                             |
|                                                                          | (Typed or printed name of person signing)                                                                                                    |
|                                                                          | PRESIDENT                                                                                                                                    |
|                                                                          | (Title of person signing)                                                                                                                    |