## P03000130816

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



500281912815

02/12/16--01005--026 \*\*52.50

R. WHILE

16 FEB 12 PM 8: 37
SECREDARY OF STATE
SECREDARY OF STATE

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	ATION: OPRR INC				
DOCUMENT NUMBE	P03000130876				
The enclosed Articles of	Amendment and fee are sub	mitted for filing.			
Please return all correspo	ondence concerning this matt	er to the following:			
R	ICHARD ARCHER				
<del></del>		Name of Contact Person			
	Firm/ Company				
50	09 CANAL WAY				
	Address				
N	NOKOMIS, FL 34275				
_		City/ State and Zip Code			
RARCE	H618@YAHOO.COM				
	_	ed for future annual report	notification)		
For further information concerning this matter, please call:					
RICHARD ARCHER		041	222 1618		
		at (	_) 223-1618		
Name of Contact Person Area Code & Daytime Telephone Numb		le & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department 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)		
	ng Address dment Section		Address ment Section		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

FILED

16 FEB 12 PM 8: 37

OPRR INC		<b>-</b>	SECRETARY OF STATE
(Name o	of Corporation as currer	tly filed with the Florida Dep	ALLAHASSEL FLUMBA t. of State
P03000130876			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation a	dopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
			The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associate	ation "Corp " "Inc," or	"Co". A professional corpor	
B. Enter new principal office address, if applicable:		509 CANAL WAY	
(Principal office address MUST BE A S.		NOKOMIS, FL 34275	···
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		509 CANAL WAY	
		NOKOMIS, FL 34275	
D. If amending the registered agent an	d/or registered office ad	dress in Florida, enter the nar	me of the
new registered agent and/or the new		<u>ss:</u>	
Name of New Registered Agent RICHARD ARCHER			
	509 CANAL WAY		
	(Florida :	street address)	
New Registered Office Address:	NOKOMIS		_, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if cl	hanging Registered Age	nt•	
I hereby accept the appointment as registe			ns of the position.
	_ //	$\gamma$	

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: 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)	<u>Title</u>	<u>Name</u>	Address
1) X Change	P	RICHARD ARCHER	509 CANAL WAY
Add		1	NOKOMIS, FL 34275
Remove		-	
2) Change			
Add		-	
Remove		_	
3 ) Change			
Add		_	
Remove			
4) Change			
Add		-	
Remove		-	
5) Change			
Add		-	
Remove		_	
6) Change			
Add		_	
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	

The date of each amendment(s) adop date this document was signed.	tion:	, if other than the
· ·		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<del> </del>
	(no more man 5% days differ dimendiment file delie)	
<b>Note:</b> If the date inserted in this bloc document's effective date on the Depart	k does not meet the applicable statutory filing requirements, the timent of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopte by the shareholders was/were suffic	d by the shareholders. The number of votes cast for the amendrient for approval.	nent(s)
	ed by the shareholders through voting groups. The following st h 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)	
☐ The amendment(s) was/were adopte action was not required.	d by the board of directors without shareholder action and share	holder
The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder action and sharehold	er
DatedSignature	19/16 Fich An	
(By a directed, b	tor, president or other officer – if directors or officers have not y an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	
RIG	CHARD ARCHER	
_	(Typed or printed name of person signing)	
PE	RSONAL REPRESENTATIVE OF THE ESTATE DONALD	J ARCHER
	(Title of person signing)	