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JUL 1 0 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ration: <u>MSB_W</u> (odworking tr)C
DOCUMENT NUME	BER:		
The enclosed Articles	of Amendment and fee are st	ibmitted for filing.	
Please return all corres	spondence concerning this m	itter to the following:	
	<u>KımBri</u>	9H+ 9Name of Contact Perso	n
	MSB Wor	dworking In	YC
	<u>lele00SE</u>	Firm/Compday 70 th St Address	
	<u>Trenton</u>	FL 3266	
	MSbWCC E-mail address:	dworking@a	Hinet
For further information	t concerning this matter, plea	se cail:	
_Kimbri	ant Selfontact Person	at (<u>353</u> Area Ce	, 474-3336 ode & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Dep	artinent 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)
<u>Mai</u>	ling Address	Street	Address

Amendment Section Division of Corporations P.O. Box 6327

Division of Corporations Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Amendment Section

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

P03000131397		
(Docum	nent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amount	ndment(s) to
A. If amending name, enter the new name of the co	orporation:	
	The	new
	d "corporation," "company," or "incorporated" or the abbrevi ," "Inc," or "Co". A professional corporation name must contai abbreviation "P.A."	
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADI</u>		_
C. Paramora mailing address if annihable		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>.</u>	=
		TP SE
D. If amending the registered agent and/or register new registered agent and/or the new registered	red office address in Florida, enter the name of the office address:	JUL -6
Name of New Registered Agent		SOCIONIA SOCIONIA PM 1
	(Florida street address)	£ 5
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	<u>vistered Agent:</u> I am familiar with and accept the obligations of the position.	
	nature 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	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VCEO	Kim Bright	16600 SE 7045+
.X_ Add		5	Trenton, FL 3269:
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional A Mach additional sheets, if necessary	v). (Be specific)
····	
	
	
<u> </u>	
If an amendment provides for an e	exchange, reclassification, or cancellation of issued shares,
provisions for implementing the a	amendment if not contained in the amendment itself:
(if not applicable, indicate N/A	<u> </u>

.

date this document was signed. Effective date if applicable:	
(no more than 90 days after amendment file date)	<u> </u>
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Michael S Bright (Typed or printed name of person signing)	
OWINDE	
(Title of person signing)	_