P04000025054

(Requestor's Name)				
(Address)				
nbbA)	ess)			
(City/	State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				





200291540912

11/03/16--01020--014 **35.00

SPANNING CORPORATION

NOV - 4 2016 C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	O.T. Now, Inc.				
DOCUMENT NUM	IBER: PC	4000020	5054		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	Peggy G. Johnson				
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	1		
	O.T. Now, Inc.				
		Firm/ Company			
	10805 SW 52nd Terrace				
		Address			
	Gainesville, FL 32608				
		City/ State and Zip Code	e		
fpjo	hns@hotmail.com				
- 	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:	·		
Freddie A. Johnson		352 at (870-5139		
Name of Contact Person			de & Daytime Telephone Number		
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			
		Tallah:	ssee FI 32301		

Articles of Amendment

to

Articles of Incorporation

FILEE SECRETARY OF STATE! DIVISION OF CORPORATION

· /), +	Now.	Too	JIVISION OF CO	er Porking
(Name of Co	poration as cu	urrently filed with the Florida Dept. of State)	2016 NOV - 3	PH T: 09
		25054		
		mber of Corporation (if known)		
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	, Florida Statute	s, this Florida Profit Corporation adopts the fo	llowing amendme	ent(s) to
A. If amending name, enter the new name o	f the corporati	on:		
		poration," "company," or "incorporated" or " or "Co". A professional corporation name		n
word "chartered," "professional association,"				
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		,		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI				

D. If amending the registered agent and/or	registered offic	e address in Florida, enter the name of the		
new registered agent and/or the new reg	istered office a	ddress:		
Name of New Registered Agent				
with the State of Sta	(Flo	rida street address)		
New Registered Office Address:		, Florida		
		(City)	(Zip Code)	
New Registered Agent's Signature, if changi I hereby accept the appointment as registered of		Agent: niliar with and accept the obligations of the pos	ition.	
	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.

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally So	<u>oith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1)Change			***************************************	
Add				
Remove				
2)Change	· · · · · · · · · · · · · · · · · · ·	_		
Add				
Remove				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
3) Change		_		
Add				**************************************
Remove				
4) Change				
Add				
Remove				
5) Change				
Add		-		
Remove				
6) Change		_	**************************************	
Add				
Remove				

(Attac	h additional sheets, if necessary). (Be specific)
RTICL	E V
he agg	regate number of shares which this corporation shall have authority to issue is the total sum of 25,000 shares, having
ın indiv	dual par value of \$0.10.
ARTICL	E VIII
The spec	cific nature of business of this corporation is all categories of: Occupational Therapy
	
<u></u>	
FIL.1 11	
·	
prov	amendment provides for an exchange, reclassification, or cancellation of issued shares, visions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
N/A	
	

The date of each ainendment(s	adoption:	, if other than th
date this document was signed.		
	lovember 1st, 2016	FILED OTHER FARY OF STATE
Effective date <u>if applicable</u> :		SCURETARY OF STATE SIVISION OF CORPORATION
•	(no more than 90 days after ame	•
Note: If the date inserted in the document's effective date on the		2016 NOV -3 PM $: 0$ ling requirements, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes sufficient for approval.	s cast for the amendment(s)
	approved by the shareholders through voting group for each voting group entitled to vote separately of	, ,
"The number of votes of	ast for the amendment(s) was/were sufficient for a	pproval
by		<u>"</u>
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without sharehol	lder action and shareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder	action and shareholder
11-1-20	16	
Dated	•	
Signature	man & Optruson	
	a director, president or other officer if directors	
	cted, by an incorporator - if in the hands of a rece	iver, trustee, or other court
арр	ointed fiduciary by that fiduciary)	
	Peggy G. Johnson	
	(Typed or printed name of person s	igning)
	President	
	(Title of person signing	3)

- -- -