## P04000053896

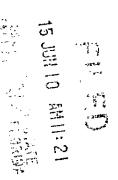
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JUN 2 2 2015 C **McN**AIR

## **COVER LETTER**

TO: Amendment Section

Division of Corpora	ations	_		
NAME OF CORPORA  DOCUMENT NUMBE	DALLAA	rity Rein 0053890	PorcingIn	.C.
The enclosed Articles of	Amendment and fee are sul	omitted for filing.		हैं ज
Please return all correspo	ondence concerning this mat	ter to the following:		10
	Amana Infini 70 Ba Palm (  Infinityre  E-mail address: 40 be us	Name of Contact Person  Hy Beinf  Firm/Company  Modress  Oast, Fl  City/State and Zip Code  ode for future annual report	Drive Drive 32137- Duahoo.c	C 38.2
For further information of	oncerning this matter, please	e call:		
Amana	La MCLea Contact Person	1 at ( 386 Area Coo	597. 68 le & Daytime Telephone Nu	73 mber
Enclosed is a check for t	he following amount made p	ayable to the Florida Depa	rtment of State:	
\$35 Filing Fee	S43.75 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)	
Ameno Divisio P.O. B	ng Address Iment Section on of Corporations ox 6327 assee, FL 32314	Amendo Division Clifton	Address ment Section n of Corporations Building secutive Center Circle	

Tallahassee, FL 32301

## **Articles of Amendment**

4.		
to Articles of Inc		Carried Contraction
of		
Infinity Reinford	zing Inc.	
(Name of Corporation as current	ly filed with the Florida Dept. of S	tate)
P0400009	53896	The second secon
(Document Number of	f Corporation (if known)	2 2
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts	the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
NIA		The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	'Co". A professional corporation i	" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		the
Name of New Registered Agent NAME		
(Elavida et	eet address)	
(riorida sir	eet aaaress)	
New Registered Office Address:	, Flor	ida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	<u>:</u> with and accept the obligations of th	ne position.
Signature of New A	Registered Agent, if changing	<del></del>
Signature of New 1	cobinition reform, if comments	

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 Do	<u>oe</u>		
X Remove	Y	Mike Jo	<u>ones</u>		
_X Add	<u>\$V</u>	Sally St	nith		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s
1) Change	ST		Amanda McLear	<u>ı</u> ;	To Barrington br
Add				·	Haim Coast, FL
Remove					32137-8862
2) Change	<u>ST</u>		Timothy McLe	an	Mo Barrington br.
Add					32137-8862
Remove					<u> </u>
3 ) Change	<del></del>	<del></del>		_	
Add					
Remove					
4) Change	<del></del>	<del></del>		_	
Add					
Remove					
5)Change	<del> </del>	<del></del> -		_	
Add					
Remove					
6) Change				_ <del>_</del>	
Add					
Ramova					

If amending or adding additions Attach additional sheets, if necess	il Articles, enter che ary). (Be specific)	inge(s) here:		
NA				
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f an amendment provides for an provisions for implementing the (if not applicable, indicate N	e amendment if not	fication, or cancelle contained in the an	ation of issued share nendment itself:	<u>es.</u>
NA	· · · · · · · · · · · · · · · · · · ·		<del>,</del> _	

The date of each amendment(s) adoption:	5.2015	, if other than the
date this document was signed.	,	, ii other than the
Effective date if applicable:	0,201S	<del> </del>
(no more than 90 a	days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicab document's effective date on the Department of State's records.	ole statutory filing requirements, this date will no	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by the shareholders. The nu by the shareholders was/were sufficient for approval.	umber of votes cast for the amendment(s)	
☐ The amendment(s) was/were approved by the shareholders throug must be separately provided for each voting group entitled to vot		
"The number of votes cast for the amendment(s) was/were s	sufficient for approval	
by		
(voting group)		
☐ The amendment(s) was/were adopted by the board of directors wire action was not required.	ithout shareholder action and shareholder	
The amendment(s) was/were adopted by the incorporators without action was not required.	nt shareholder action and shareholder	
Dated $\sqrt{(e-5-1)}$		
Signature UNU M		
(By a director, president or other officer	r – if directors or officers have not been hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	lands of a receiver, trustee, or other court	
Timothy	D. McLean	<del></del>
(Typed or printed name)	me of person signing)	
$\psi_{V}$	<i>ESIDEITT</i>	
(Title of r	nerson signing)	