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(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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OINISION OF CORPORATION

SEP 22 2016 C MCNAIR

COVER LETTER

O: Amendment Section Division of Corporations
DOCUMENT NUMBER: 104 00102274
The enclosed Articles of Amendment and fee are submitted for filing.
lease return all correspondence concerning this matter to the following:
Name of Contact Person Or Christine Tropland Firm/ Company Address Melboure F1 32935 City/ State and Zip Code Lemail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (32) 759 793 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing AddressStreet AddressAmendment SectionAmendment Section

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment

to

SECRETARY OF STATIONS

 A .	Articles of In	corporation		JIVISION OF C	Old and
Chi	~15tins"	Trupiano,	MD,	PA16 SEP 19	:e MA
(Name of Cor	oration as current	ly filed with the Florida	Dept. of/St	ate)	
8 040	2560100	74			
	Document Number of	of Corporation (if known)			
Pursuant to the provisions of section 607.1006, I its Articles of Incorporation:	Florida Statutes, this	Florida Profit Corporati	ion adopts t	he following amendr	nent(s) to
A. If amending name, enter the new name of	the corporation:				
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	e word "corporation "Corp," "Inc," or	on," "company," or "in "Co". A professional co			on
B. Enter new principal office address, if appl (Principal office address MUST BE A STREET					-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u>(E BOX</u>)				
D. If amending the registered agent and/or renew registered agent and/or the new regis			e name of t	<u>he</u>	
Name of New Registered Agent			<u>.</u>		
	/El:J	(d -dd)			
	(r ioriaa si	reet address)			
New Registered Office Address:			, Flori		-
New Registered Agent's Signature, if changin I hereby accept the appointment as registered ag			ations of th	(Zip Code) e position.	
	Ci	Projectioned Agent if chan			

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>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sm	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add	•	_		
Remove				
Konove				
6) Change		_		
Add				
Remove				

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

Tife date of each amendment(s) adoption:	, if other than the
9/14/11	
Effective date if applicable: ////////////////////////////////////	late)
Note: If the date inserted in this block does not meet the applicable statutory filing requirem document's effective date on the Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendation of the separately provided for each voting group entitled to vote separately on the amendation of the separately provided for each voting group entitled to vote separately on the amendation of the separately provided for each voting group entitled to vote separately on the amendation of the separately provided for each voting group entitled to vote separately provided for each voting group entitled to vote separately provided for each voting group entitled to vote separately entitl	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action an action was not required.	nd shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	areholder
Dated 91516	
Signature Change	
(By a director, president or other officer - if directors or officers ha	
selected, by an incorporator – if in the hands of a receiver, trustee,	or other court
appointed fiduciary by that fiduciary)	
Christine Inplano	
(Typed or printed name of person signing)	
$\mathcal{M}^{\mathcal{O}}$	
(Title of person signing)	