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Name Change

DEC 1 2 2018 D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence epicerning this matter to the following: Firm/ Company For further information concerning this matter, please call: Name of Contact Person Area Code & 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 & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status

(Additional copy is

enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Talfahassee, FL 32314 Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Certified Copy

(Additional Copy is enclosed)

Articles of Amendment

Articles of Incorporation

Law OFFices of N	otalie F Doe	DA
104000100981	y filed with the Florida Dept. of State)	1 1-71
	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the	m, PA	The new
"Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "F	, "company," or "incorporated" or Co". A professional corporation name P.A."	the abbreviation must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NIX	
————,		=
		新 经股
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	9- 330- 50- 21- 40- 1- 10- 40- 1- 40-
		P 020
		N 25 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of the	TAFE A TOPE
the new registered office address:		C,
Name of New Registered Agent	7	·
	·	
* (Florida street	address)	
New Registered Office Address:	, Florida	
(C)	ity)	Zip Code)
Now David		
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with		
Tam jamiliar with	t and accept the obligations of the positi	on.
Signature of New Regi	stered 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 <math>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	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change		NIA	
Add			·
Remove			
2) Change	·-·-		
Add .			
Remove			
3) Change		_	
Add			
Remove			
4) Change			
-			
Add			
Remove			
5) Change			
Add			
Remove			
0 0			
6) Change			
Add			
Remove			

If amending or adding additional Art	ticles, enter change(s) here:
Attach additional sheets, if necessary).	(Be specific)
NIK	
	· · · · · · · · · · · · · · · · · · ·
	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
. 1/ \	
NITI	

•		- 10	
The date of each amendment(s) adoption date this document was signed.	Decemb	xer 1,2018	, if other than the
Effective date if applicable:	no more than 90 days	after amendment file date)	
Note: If the date inserted in this block of document's effective date on the Departm		statutory filing requirements, this date w	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient		per of votes east for the amendment(s)	
☐ The amendment(s) was/were approved must be separately provided for each			
"The number of votes cast for the	amendment(s) was/were suffi	cient for approval	
by The amendment(s) was/were adopted by	(voting group)	ut chareholder action and chareholder	
action was not required.	y the total of directors witho	in shareholder action and shareholder	
☐ The amendment(s) was/were adopted by action was not required.	by the incorporators without sh	areholder action and shareholder	
Dated	cc 4 20	18	
(By a directo		f directors or officers have not been	
	n incorporator – if in the hand uciary by that fiduciary)	s of a receiver, trustee, or other court	
	Natali	e E. OCC	· · · · · · · · · · · · · · · · · · ·
	(Typed or printed name of	of person signing)	