# PD4001113005

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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	<del>=</del> #)
PICK-UP	WAIT	MAIL MAIL
(Ві	usiness Entity Nan	ne)
(Do	ocument Number)	
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Amend CUS

# **COVER LETTER**

TO: Amendment Section Division of Corporations The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: 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 Certified Copy enclosed) (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
Tallahassee, FL 32301



# Articles of Amendment to Articles of Incorporation of

Name of Corporation as currently fi	led with the Florida Dept. of State)
P0400016300	
	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:
	The new
name must be distinguishable and contain the work "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	d "corporation," "company," or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	5200 W Newberry Rd
	Geinesville, FL 32607
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>X</u> )
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:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obligations of the position.
Signature of No	w 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>VS</u>	Katherine Milley	11112 NW 70th Cir Chiefland, FL 32626
Add		,	Chiefland, FL 32626
Remove			
2) Change	PT	Ian Milloy	11112 NW 70th Cir Chicfland, FL 32626
Remove 3) Change	<u>D</u>	Keith Milloy	5205 NW 33rd pl Gainesville, FL 3260
Add Remove			- Sainesville , FL 32600
4) Change			
Add			
Remove			
5) Change			<del></del>
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

tach additional sheets, if necessary).	(Be specific)
an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
provisions for implementing the amo	nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

date this document was signed.	ption:	, if other than t
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	ted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and shareholder	
Dated 19	12014	
Signature	Atherine 8/1/illa	<u> </u>
selected,	by an incorporator – if in the lands of a receiver, trustee, or other court diductory by that fiductory)	
_	Hatherine Milloy	
	(Typed or printed name of person signing)	<del></del>
_	President (Title of person signing)	
	( rule of person signing)	