P05000023202

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(Cit	y/State/Zip/Phone	e #)	
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Certified Copies	_ Certificates	of Status	_
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Special Instructions to	Filing Officer:		
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: C. Jones C	onsulting Inc		
	_{ER:} P0500023202			
	of Amendment and fee are sul			
	-	_		
Please return all corres	pondence concerning this mat	ter to the following:		
	Carter Jones			
		Name of Contact Persor	1	
	C Jones Consulti	ng Inc.		
		Firm/ Company		
_	522 Alt 19 N			
		Address		
_	Palm Harbor, FL 34683			
		City/ State and Zip Code	e	
aj@	cjonesconsulting	.com		
<u>, , c</u>		ed for future annual report	notification)	
For further information	concerning this matter, pleas	e call:		
Carter Jones		727	771-9500	
Name o	f Contact Person	at (Area Co	771-9500 de & Daytime Telephone Number	
Englocad is a phage for	the following amount made p			
Theresed is a check for	the following amount made p	bayable to the Florida Depa	infinent 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)	
	ing Address		Address	
Amendment Section Division of Corporations		Amendment Section Division of Corporations		
P.O.	P.O. Box 6327 Clifton Building		Building	
Talla	hassee, FL 32314		xecutive Center Circle	

Articles of Amendment to Articles of Incorporation of



C. Jones Consulting Inc.				~~ <i>(</i> 2)
(Name of Corporation as currently	filed with the Flori	da Dept. of State)		·
P05000023202				
(Document Number of	of Corporation (if kn	own)		
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	ida Statutes, this <i>Floi</i>	rida Profit Corporation add	opts the following	g amendment(s) t
A. If amending name, enter the new name of the	corporation:			
				The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corword "chartered," "professional association," or th	rp," "Inc," or "Co"	1. A professional corporati	rated" or the ab	bbreviation
B. Enter new principal office address, if applicab (Principal office address MUST BE A STREET AL				
	-			
C. Fatanasana Wasada a Maria	-	. Address		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	BOX)			
	_			
B. Hannan Parist and Carlot and Carlot	-			
D. If amending the registered agent and/or regist new registered agent and/or the new registere		in Florida, enter the nam	e of the	
Name of New Registered Agent				
	(Florida street d	iddress)		
New Registered Office Address:	(City)	, Florida_		
	(Ciţy)		(Zip Code)	
New Registered Agent's Signature, if changing Re	egistered Agent:			
I hereby accept the appointment as registered agent.	. I am familiar with	and accept the obligations	of the position.	
	-			
Signature of l	New Registered Agei	n, 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>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Ezra Smith	522 Alt 19n ste 3
Add			Palm Harbor, FL 34683
X Remove			
2) Change			
Add			.
Remove			
3) Change			
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			_
Add			
Remove			
6) Change			
Add			
Remove			

les, enter change(s) here: (Be specific)
the operator
nge, reclassification, or cancellation of issued shares,
dment if not contained in the amendment itself:

The date of each amendment(s) adoption: 2/25/13		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
py.	··	
	(voting group)	
action was not required.	pted by the board of directors without shareholder action and shareholder	
action was not required.		
Dated 2/25/13	3 ,	
Signature		
	rector, president or other officer – if directors or officers have not been	
	d. by an incorporator – if in the hands of a receiver, trustee, or other court	
арронц	ed fiduciary by that fiduciary) Auen Tores	
	(Typed or printed name of person signing)	
	PECIDENT	
•	(Title of person signing)	