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SECON LARY OF STATE OF STATE OF CORPORATIONS OF CORPORATIONS OF CORPORATIONS

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COVER LETTER
TO: Amendment Section Division of Corporations
NAME OF CORPORATION: SUNCOST BOOFING OF POINTS
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following: Name of Contact Person
Suncoast hooting of Polls County
2003 Shoreland Dr
Auburndale, 41 338-33
City/ State/and Zip Code Solvand Freely O Jahoo. Com E-mail address: (to be used for future annual report potification)
For further information concerning this matter, please call:
Name of Contact Person at (\$\sigma 63) \frac{968-9717}{\text{Area Code & Daytime Telephone Number}}
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) \$252.50 Filing Fee Certificate of Status Certified Copy (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 Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreaucorp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must configuration," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New 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>	<u>Name</u>	<u>Addres</u> s			
1) Change	1_	Jarde S. Adhiff	2003 Shoreland O.			
Add Remove			Auborndale, 71. 33823			
2) Change		_				
Add						
Remove						
3) Change		_				
Add						
Remove						
4) Change						
Add						
Remove			·			
5) Change		_				
Add						
Remove						
6) Change						
Add						
Remove						

f amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	
	-	
1.1.1.		
	A Miles reserve	
f an amendment provides for an exc	hange, reclassification, or can	cellation of issued shares,
provisions for implementing the am (if not applicable, indicate N/A)	ndment if not contained in th	e amendment itself:
(y not apprisació, materio sorr)		
	-	
		
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The date of each amendment(s) adoption:	_, 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 does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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	
by"	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated3-15-117	
Signature Linda R Rattiff	
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Linda R. Mathilt	
(Typed or printed name of person signing)	
<u>Hesident</u>	<u>.</u>
(Title of person signing)	