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SEP 19 2016 R. WHITE 16 SEP 14 AM 10: 44

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Jest	Enterprises, Inc.
DOCUMENT NUMBER: PO500	·
The enclosed Articles of Amendment and fee are suit	
Please return all correspondence concerning this mat	tter to the following:
Jest Er 541 MCK Cantonne	Name of Contact Person Herprises, Inc. Firm/ Company enzie Rd Address nt, FL 32533 City/ State and Zip Code
E-mail address: (to be use	ed for future annual report notification)
For further information concerning this matter, please	e call:
Name of Contact Person Enclosed is a check for the following amount made p	at (<u>850</u>) <u>791 - 1987</u> Area Code & Daytime Telephone Number
\$35 Filing Fee \$\times \text{Certificate of Status}\$	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 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 to

,	Articles of Incorporation of	16 SEP 14 AM 10: 44
lect	Enterprises Ina	orogramay (C. IAIF
(Name of Co	Enterprises, Incorporation as currently filed with the l	Florida Dept. of State)
_	5000088948	
	(Document Number of Corporation (if I	known)
cursuant to the provisions of section 607.1006 as Articles of Incorporation:	i, Florida Statutes, this <i>Florida Profit Co</i>	orporation adopts the following amendment(
. If amending name, enter the new name of	of the corporation:	
		The new
ame must be distinguishable and contain Corp.," "Inc.," or Co.," or the designation ord "chartered," "professional association,	"Corp," "Inc," or "Co". A profession	or "incorporated" or the abbreviation onal corporation name must contain the
B. Enter new principal office address, if ap Principal office address <u>MUST BE A STRE</u>		
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)	<u>e:</u> ICE ROX)	
,g		
. If amending the registered agent and/or new registered agent and/or the new reg		nter the name of the
Name of New Registered Agent		.
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if chang	ing Registered Agent:	
hereby accept the appointment as registered		e obligations of the position.
	Signature of New Registered Agent, i	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.

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>	Address
1) Change	<u>vp</u>	Teresa Tipton	541 Mc Kenzie Rd Cantonment, FC 32533
<u></u> ★ Add			Cantonment, FC 32533
Remove			
2) Change		_	
Add			
Remove			
3) Change	-		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	***		
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here (Be specific)			
		-		
			···-	
				_
			_ _	
			·	
f an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or	cancellation of issued	<u>shares,</u> f.	
(if not applicable, indicate N/A)	adment it not contained i	it the amenament user	<u></u>	

The date of each amendment(s) adoption:	9-1-2016	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	9-1-2016	
(6	no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of Sta	meet the applicable statutory filing requirements, this date's records.	ate will not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)	
The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for app	areholders. The number of votes cast for the amendment(roval.	(s)
☐ The amendment(s) was/were approved by the st must be separately provided for each voting gra	nareholders through voting groups. The following statem oup entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendn	nent(s) was/were sufficient for approval	
by	group)	
(voting	group)	
☐ The amendment(s) was/were adopted by the boa action was not required.	ard of directors without shareholder action and sharehold	ег
☐ The amendment(s) was/were adopted by the incaction was not required.	orporators without shareholder action and shareholder	
Signature (By a director, presider	nt or other officer – if directors of officers have not been orator – if in the hands of a receiver, trustee, or other courthat fiduciary)	
<u>Jar</u>	nes W Tipton Jr. ped or printed name of person signing)	
	President	
	(Title of person signing)	