P05000121953

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
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Amend

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SH DISTRI	IBUTION INC.	
DOCUMENT NUMBER: P0500012195	53	
The enclosed Articles of Amendment and fee are su		
Please return all correspondence concerning this ma	atter to the following:	•
Joshua M, Liszt		
	Name of Contact Person	
Liszt & Associate	es, PA	
	Firm/ Company	
1200 N. Federal	Highway, Suite 2	200
	Address	
Boca Raton, FL 3	33432	
	City/ State and Zip Code	
josh@lisztlaw.com		
, –	sed for future annual report	notification)
For further information concerning this matter, pleased Joshua M. Liszt		869-3703
Name of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	□\$43.75 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	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment Articles of Incorporation



SH DISTRIBUTION INC.

(Name of Corporation as current	ly filed with the Florida Dept. of State)	
\ 		

P05000121953

(Document	t Number of Corporation (if k	nown)	***
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this Fl	orida Profit Corporation ac	lopts the following amendmen
A. If amending name, enter the new na	me of the corporation:	,	
		<u>, </u>	The new
name must be distinguishable and conto "Corp.," "Inc.," or Co.," or the designe word "chartered," "professional associat	ation "Corp," "Inc," or "Co	o". A professional corpore	orated" or the abbreviation
B. Enter new principal office address, i	f applicable:	c/o Liszt & Asso	ciates, PA
(Principal office address MUST BE A ST		1200 N Federal Highway, Suite 200	
		Boca Raton, FL	33432
C. Enter new mailing address, if applie		c/o Liszt & Asso	ciates, PA
		1200 N. Federal High	way, Suite 200
		Boca Raton, FL	33432
D. If amending the registered agent and new registered agent and/or the new	registered office address:		ne of the
Name of New Registered Agent	Liszt & Associate	·	
	1200 N. Federal H	<u> </u>	-
	(Florida stree		22422
New Registered Office Address:	Boca Raton	, Florida	33432 (Zip Code)
	(City)		(Σιρ Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as registe Sig	nanging Registered Agent: ered agent. I am familiar wi mature of New Registered		es of the position. -

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	1 .	
X Add	<u>SV</u>	Sally Smith	NA	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change Add Remove				
2) Change Add Remove				
3) Change Add Remove		_		
4) Change Add Remove				
5) Change Add Remove	-	_		
6) Change Add Remove				

	al sheets, if necessar	y). (Be specific)			
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an amendm	nt provides for an e	evchange, reclassi	fication, or cance	llation of issued s	hares.
rovisions for	implementing the a	amendment if not	contained in the	amendment itself	<u> </u>
(ij not apj	licable, indicate N/A	1)			
			V ■••••	,,, , <u>,</u> ,	
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			***	 -	

	7/11/12
The date of each amendment(s) ad	7/11/7
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	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
by	(voting group)
	(voting group)
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder
Dated	11/17
Signature) _ <
(By a/di	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 and fiduciary by that fiduciary)
• • •	Jodana list
	(Typed or printed name of person signing)
A	Horney-EN-Fact
- /	(Title of person signing)