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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: Advanced Enterpr	ises of Northwest F	Florida, Inc	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUM	IBER: P05000146070			
The enclosed Article	s of Amendment and fee are su	ibmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the followin	g:	
	James A. Shea, Jr., Chief Le	gal Officer		
		Name of Conta	ct Person	7 5 7 8 A A
	Adcomm			
		Firm/ Com	pany	
	2183 W. Highway 98			
		Addres	s	
	Mary Esther, FL 32569			
		City/ State and	Zip Code	
ishe	a@adcomm.com			
	E-mail address: (to be us	sed for future annua	al report n	atification)
	in man address. (10 00 a.	sea for ratare annua	ar report is	ornication)
For further information	on concerning this matter, pleas	se call:		
James A. Shea, Jr.		at ()	462-9363
Name			& Daytime Telephone Number	
Enclosed is a check f	for the following amount made	payable to the Flori	ida Depart	ment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Certified Copy (Additional copenclosed)	/	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 lahassee, FL 32314		Division Clifton B	ent Section of Corporations

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

•	01			
Advanced Enterprises of Northwest Flori	da, Inc.			
(Name o	of Corporation as current	ly filed with the Florida De	pt. of State)	
P05000146070				
	(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation	adopts the following ame	endment(s) to
A. If amending name, enter the new na	me of the corporation:		2= 6+2 2= 6+2 2= (*1	23
Adcomm, Inc.				Caow Ti
name must be distinguishable and con. "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or tion," or the abbreviation	"Co". A professional corpo	porated" or the Abbrev	riațion 👾 👑
B. Enter new principal office address, (Principal office address MUST BE A S				3 3
C. Enter new mailing address, if appli (Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new	OFFICE BOX) d/or registered office add		ame of the	
Name of New Registered Agent	N/A		<u></u>	
New Registered Office Address:	(Florida sı	treet address)	. Florida	
THE WINESTITUTE OF THE PLANTESS.	(City)	(Zip Code)		
New Registered Agent's Signature, if c I hereby accept the appointment as regist			ons of the position.	

Signature of New Registered Agent, if changing

1			
address of each Officer (Attach additional sheets Please note the officer/d. P = President; V= Vice Executive Officer; CFO held. President, Treasure Changes should be noted	and/or I s, if neces irector til Presiden = Chief er, Direct d in the fo	sary) The by the first letter of the office title: It; T= Treasurer; S= Secretary; D= Director; TR= Tri Financial Officer. If an officer/director holds more the tor would be PTD. It is playing manner. Currently John Doe is listed as the P Corporation, Sally Smith is named the V and S. These sh	ustee; C = Chairman or Clerk; CEO = Chief an one title, list the first letter of each office ST and Mike Jones is listed as the V. There is
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			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	- <u> </u>		
Add			<u></u>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			

__ Remove

/A ,	iaaitionai sheets,	if necessary).	(Be specific)				
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						- -	
lf an an	<u>tendment provid</u>	<u>les for an exch</u>	ange, reclassific	cation, or cancell	ation of issued sh	<u>iares,</u>	
	ons for impleme	enting the ame	<u>ndment if not co</u>	ntained in the ar	nendment itself:		
<u>provisi</u>	not applicable, in	raicale IVA)					
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	7/5/2016	
The date of each amendment(s date this document was signed.) adoption:	, if other than t
_	7/5/2016	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date Department of State's records.	te will not be listed as t
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(se sufficient for approval.	i)
	approved by the shareholders through voting groups. The following stateme for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	भ
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
7/5/201	6	
Dated		
C:chura (
Signature(By	a director, president or other officer - il directors or officers have not been	-
- 1954 <u>- 1954</u>	sted, by an incorporator - if in the hands of a receiver, trustee, or other cour	t
app	ointed fiduciary by that fiduciary)	
	JEFF DAVIS CC	
	(Typed or printed name of person signing)	
	DIRECTOR/PRESIDENT	
	(Title of person signing)	