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SECRETARY OF STATE TALL ANIASSEE, FLORIDA

VC/Amd

SEP. 13 2013

R. WHITE

## **COVER LETTER**

TO: Amendment Section

Division of Corporat	ions				
NAME OF CORPORAT	TION: MIKE 4	ace, Inc			
	DACAMA	19250			
DOCUMENT NUMBER	1:	47579	<del>_</del>		
The enclosed Articles of A	Amendment and fee are sub	omitted for filing.			
Please return all correspon	ndence concerning this mat	ter to the following:			
_	Michael	face			
	Michael face  Name of Contact Person  Mike face, The  Firm/ Company  Joi Harbour Pointe Way  Address  Freenacres R 3343  City/ State and Zip Code				
=		Firm/ Company			
	201 Har	-bour Pointe	Way		
<del></del>		Address			
	freenac	185 R 33-	#3		
<del></del>		City/ State and Zip Code	<del></del>		
	_				
	Michael Ro	ece O Granil. Covered for future annual report	~		
	E-mail address: (to be us	ed for future annual report	notification)		
For further information co	oncerning this matter, pleas	se call:			
Michael	1 face	at (SCI)	779-9648 de & Daytime Telephone Number		
	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
Enclosed is a check for tr	ie ioliowing amount made	payable to the Florida Depa	iriment of state:		
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailin	g Address	Street	Address		
Amendment Section		Amendment Section			
. Division of Corporations		Division of Corporations			
P.O. Box 6327 Clifton Building					
Tallaha	issee, FL 32314	2661 E	xecutive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

Mike lace, The		PB SEP -3 AM	9: 27
(Name of Corporation as currently filed with the	Florida Dept. of State)	SECRETARY OF	ŜTATE:
105080149379	:	EALLAHASSEE, F	LORIDA
(Document Number of Corporation	(if known)		<del></del> ,
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	s Florida Profit Corporat	ion adopts the follow	ing amendment(s) to
A. If amending name, enter the new name of the corporation:			
mame must be distinguishable and contain the word "corporate	/ρ.		The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional co		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			<del></del>
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 adnew registered agent and/or the new registered office address			- - -
Name of New Registered Agent			
·	street address)		
New Registered Office Address: (Ci		orida(Zip Code)	<del></del>
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	r with and accept the obliq	zations of the position	7.
Signature of New Registere	u Ageni, ij crianging		

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:	, ana bar	ly chilling of as an riau.	
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	<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			

	nal sheets, if necessary).	ticles, enter chan . (Be specific)			
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				····	<del></del>
·					
an amendme	ent provides for an exc	change, reclassifi	cation, or cancel	lation of issued s	hares.
<u> </u>	r implementing the am	nendment if not co	ontained in the a	mendment itself:	
<u>rovisions for</u>					
<u>provisions for</u>	plicable, indicate N/A)				
<u>provisions for</u>	plicable, indicate N/A)				
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<u>provisions for</u>	plicable, indicate N/A)				
<u>provisions for</u>	plicable, indicate N/A)				

The date of each amendment(s) adoption: 9/30/13	, if other than th
date this document was signed.  Effective date if applicable: 9/1//3	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
☐ 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)	
(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.	
Dated 8/30/13	
DatedSignature(MMU	
(By a director, president or other officer - if directors or officers have not been	<del></del>
selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Michael Pace	
(Typed or printed name of person signing)	
President	
(Title of person signing)	

## **COVER LETTER**

TO: Amendment Section

Division of Corpora	ations			
NAME OF CORPORA	TION: MILE POSODO	ace Inc		
D 0 CV 12 FD 100 NV 12 FD 0	PASMO	49279		
DOCUMENT NUMBE	R:	1/3//	<u> </u>	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all correspo	ondence concerning this mat	<del>-</del>		
	Michael	Name of Contact Person  Se TW  Firm/ Company  - bour fointe  Address  Ves R 33-  City/ State and Zip Code		
	MIKE Pac	Name of Contact Person		
_		Firm/ Company		
	201 Have	-bour Pointe	Way	
_		Address		
	Freenac	125 R 33	43	
_		City/ State and Zip Code	;	
	_			
	Michaelila	eccolorial Consection future annual report	^	
	E-mail address: (to be us	sed for future annual report	notification)	
For further information of	concerning this matter, pleas	se call:		
Michae	1 face	at (_5701	de & Daytime Telephone Number	
Name of	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for t	he following amount made	payable to the Florida Depa	rtment of State:	
	_			
□ \$35 Filing Fee	□\$43.75 Filing Fee &	□\$43.75 Filing Fee &		
	Certificate of Status	Certified Copy (Additional copy is	Certificate of Status Certified Copy	
		enclosed)	(Additional Copy	
		chelosed)	is enclosed)	
Maili	na Address	Street	Address	
Mailing Address Amendment Section		Street Address Amendment Section		
Division of Corporations			n of Corporations	
	30x 6327		Building	
Tallah	assee, FL 32314	2661 E	xecutive Center Circle	

Tallahassee, FL 32301