P6000035011

(Re	equestor's Name)	·
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

TQ: Amendment Section Division of Corporations

NAME OF CORPORATION: Endriss En	terprises, Inc.	
DOCUMENT NUMBER: <u>P06000035011</u>		
The enclosed Articles of Amendment and fee ar	re submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
Caren Endriss		
(Name o	of Contact Person)	
Molly Maid of Martin and	l Northeast Palm Beac	h County
(Fire	m/ Company)	
657 SE Central Parkway	#310	
	(Address)	
Stuart, Florida 34994		
(City/ St	ate and Zip Code)	
For further information concerning this matter,	please call:	
Caren Endriss	at (772) 463-18	382
(Name of Contact Person)	(Area Code & Daytime	e Telephone Number)
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & Certificate of Status	✓ \$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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C	

Tallahassee, FL 32301

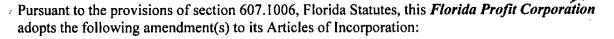
Articles of Amendment to Articles of Incorporation of

Endriss I	Enter	orises.	Inc
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(Name of corporation as currently filed with the Florida Dept. of State)

P06000035011

(Document number of corporation (if known)



NEW CORPORATE NAME (if changing):

NEW CORTORATE NAME (Ir changing).
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
Please add the following officers to the corporation-
Jeff Endriss, President of Endriss Enterprises, Inc.
Caren Endriss, Director of Endriss Enterprises, Inc.
(Attach additional pages if necessary)
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A

(continued)

The date of each amendment(s) adoption:
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (<u>CHECK ONE</u>)
The amendment(s) was/were approved 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.
Signature (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)
Jeff W. Endriss and Caren J. Endriss (Typed or printed name of person signing)
Incorporator and Incorporator
(Title of person signing)

FILING FEE: \$35