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	(Address)	<del></del>
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	(Business Entity Nam	e)
	(Document Number)	
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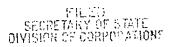
## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: McFaul F	nterprises Inc.
DOCUMENT NUMBER: P0600004647	
The enclosed Articles of Amendment and	
Please return all correspondence concerning	g this matter to the following:
Bryan McFaul	
	Name of Contact Person
McFaul Enterprises	Inc.
	Firm/ Company
4203 Old Boynton	Load
	Address
Boynton Beach, FL	33436
<del></del>	City/ State and Zip Code
AQSMEI@GMAIL.COM	
E-mail address	(to be used for future annual report notification)
For further information concerning this ma	ter, please call:
Bryan McFaul	at (561 ) 396-0398  Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amou	nt made payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Certificate of	
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



McFaul Enterprises Inc.			16 MAY 23	PM 1:12
	Corporation as currently	filed with the Florida Dept	. of State)	
P06000046746				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this I	Florida Profit Corporation ac	lopts the following ame	endment(s)
A. If amending name, enter the new name	me of the corporation:			
N/A			The	new
name must be distinguishable and conto "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associate	ttion "Corp," "Inc," or "(	Co". A professional corpora P.A."		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		N/A		
				<u> </u>
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		N/A		
D. If amending the registered agent and new registered agent and/or the new			ne of the	
···	N/A	•		
Name of New Registered Agent				
	(Florida stre	eet address)		
New Registered Office Address:			, Florida	
	•	(City)	(Zip Code)	
Now Designated Agent's Signature if the	andina Darietana Assat			
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	ered agent. I am familiar v	vith and accept the obligation	s of the position.	
, , , ,	,	1 3	,	

Signature of New Registered Agent, 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.

Example: X Change	<u>PT</u>	John De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	<u>v</u>		Albert Burkhart	109 Heather Lane
<u>X</u> Add				Delray Beach, FL 33444
Remove				
2) Change		<del>-</del>		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				<u></u>
Remove				

E. If amending or adding additional Article (Attach additional sheets, if necessary).	(Be specific)
√A	
·	
F. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
N/A	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
5/16/2016	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
(no more inan 90 days after amenament file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date widocument's effective date on the Department of State's records.	ll not be listed as the
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)	- <del></del>
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.  5/16/2016  Dated	16 HAY 23 PH 1: 12
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)  Bryan McFaul  (Typed or printed name of person signing)	
President	
(Title of person signing)	