## P06000054854

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## COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Mikes P06000054854 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Michael Brookshine Name of Contact Person Firm/ Company Address City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (<u>\$50</u>) <u>459-4483</u> Area Code & Daytime Telephone Number Brookshire Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

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## Articles of Amendment to Articles of Incorporation

14 SEP 26 PH 1:59

Miles broots	Mikes		inc	SECRICIAN C	G STANE FI CNIDA
(Name of Corporation as currently		_		Half car and con-	
Q 06 00005 4 85 (Document Number	4			·	_
(Document Number	of Corporation (if l	known)			
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	ida Statutes, this Fi	lorida Profit Cor	poration a	dopts the following	ng amendment(s) t
A. If amending name, enter the new name of the	corporation:				
·					The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or th	rp," "Inc," or "Co	o". A profession	r "incorp nal corpor	orated" or the a ation name must	bbreviation contain the
B. <u>Enter new principal office address, if applicat</u> (Principal office address <u>MUST BE A STREET AL</u>	ole: DDRESS )				<del>.</del> .
					_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>3<i>0X</i></u> )				-
					_
D. If amending the registered agent and/or regist new registered agent and/or the new registered.		ss in Florida, ent	ter the na	me of the	
Name of New Registered Agent				-	
	(Florida stree	et address)		_	
New Registered Office Address:			, Florida	1	
	(City)			(Zip Code)	-
				,	
New Registered Agent's Signature, if changing R l hereby accept the appointment as registered agent		ith and accept the	obligation	ns of the position.	
				~	
Signature of	New Registered Ag	gent 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	PT John 1	<u>Doe</u>	
X Remove	V Mike	<u>Jones</u>	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		Dustin Ledford	133 Catawba Tol
Add			Crawfordulle FC
Remove			32327
2) Change		Jason Smith	133 Catawha Trl
Add		•	Crawford ville FC
Remove			32327
3) Change	$\mathcal{Q}$	Hank Carter	133 Cataway Tr/
Add		<i>*</i>	Crawfordville FL
Remove			32327
4) Change	<u>Q</u>	Warren Schutte	133 Catawha Trl
Add			Crawfordville FC
Remove		·	32327
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)	AS) HEFE:		
		<u> </u>		
	· <del>-</del>			
	· <del></del>			
			,	
		_		
f an amendment provides for an exch	ange, reclassifica	tion, or cancellation	of issued share	<u>s,</u>
provisions for implementing the amer (if not applicable, indicate N/A)	idment if not con	tained in the amend	ment itself:	
		<del></del>		
				<u> </u>
			<del></del> -	
		<del></del>		
	<del></del>		. <u> </u>	<del></del>



The date of each amendment(s) adoption	on: <u>7-6</u>	- 1019	14 20 17 1: 3	jg, if other than the
date this document was signed.	9.76	n=14	STOATLAR IT MA	Æ
Effective date if applicable:	(no more the	ın 90 days after a	mendment file date)	<del>D</del> A
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopted by the shareholders was/were sufficient		The number of vo	otes cast for the amendment(s	;)
The amendment(s) was/were approved must be separately provided for each				ent
"The number of votes cast for the	e amendment(s) was	were sufficient fo	r approval	
by	<u>.</u>		.,,,	
	(voting group)			•
The amendment(s) was/were adopted taction was not required.	by the board of direc	tors without share	holder action and shareholde	ar
The amendment(s) was/were adopted to action was not required.	by the incorporators	without sharehold	er action and shareholder	•
Dated9-7.6	-2014	<del></del> +		
Signature				
(By a director	r, president or other		rs or officers have not been	
	an incorporator – if i luciary by that fiduci		eceiver, trustee, or other cour	t .
app		,,		
<u> </u>		BrooksL		· ————
	(Typed	or printed name o	f person signing)	
·	Oba	President	<u> </u>	
		(Title of person s	ienine)	_