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	□ MAZAIT		
☐ PICK-UP	☐ WAIT	MAIL	
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Certified Copies Certificates of Status			
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Special Instructions to	Filing Officer:		

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COI	RPORATION: United Forces, Inc	·	 		
DOCUMENT N	UMBER: P06000074736				
The enclosed An	ticles of Amendment and fee are su	bmitted for filing.			
Please return all	correspondence concerning this ma	tter to the following:			
	John Purland				
		Name of Contact Person	1		
	United Forces, Inc.				
	 	Firm/ Company			
	2840 NW 2nd Ave, 349				
		Address	· · · · · · · · · · · · · · · · · · ·		
	Boca Raton, FL 33431				
		City/ State and Zip Code	e		
	Lori.Wolin@gmail.com				
_		sed for future annual report	notification)		
		·	,		
For further inform	nation concerning this matter, pleas	se call:			
Lori Wolin		, 561	3763944		
N	ame of Contact Person	at (Area Code & Daytime Telephone Number			
• • • • • • • • • • • • • • • • • • • •	and of Contact Forson	110400	ac a Bayamo receptione reamour		
Enclosed is a che	eck for the following amount made	payable to the Florida Depa	artment of State:		
\$35 Filing Fo	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 Circle			
		Tallaha	issee, FL 32301		

Articles of Amendment to Articles of Incorporation of

United Forces, Inc.	
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P06000074736	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must confain the
B. Enter new principal office address, if applicable:	N/A 54 4 4
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	$\frac{1}{2}$
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office ad-	dress in Florida, enter the name of the
new registered agent and/or the new registered office addre	
Name of New Registered Agent N/A	
(Florida s	street address)
New Registered Office Address: N/A	, Florida
Trop register on Office Than egg.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ager	
I hereby accept the appointment as registered agent. I am familian	with and accept the obligations of the position.
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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1)Change	D	Janah Purland	733 St. Albans Drive
Add X Remove			Boca Raton, FL 33486
2) Change			
Add			
3) Change			
Remove			
4) Change			
Add			
5)Change			
Add Remove			
6) Change			
Add			
Remove			

(Attach additional	adding additional A al sheets, if necessary). (Be specific)	ige(s) hele.			
I/A						
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. If an amendmer	nt provides for an ex	xchange, reclassifi	cation, or cancel	lation of issued sh	ares.	
(if not appl	implementing the andicate N/A)	menament ii not c	ontained in the a	menament itsen:		
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8/1/2011
The date of each amendment(s) adoption:, if other than the date this document was signed.
8/31/2015 Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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)
☐ 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 8-31-15
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)
John Porland
(Typed or printed name of person signing)
Director
(Title of person signing)