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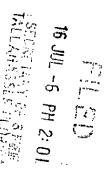


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JUL 07 2016

R. WHITE





June 9, 2016

SCOTT L LYONS 611 WASHBURN RD UNIT 26 MELBOURNE, FL 32934

SUBJECT: PRIVACY ON DEMAND, INC.

Ref. Number: P06000141420

We have received your document for PRIVACY ON DEMAND, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 616A00012204

05/31/2016

To whom it may concern:

We Privacy on Demand are writing for the following reasons/requests:

- 1. Change of address
- 2. Adding (2) Managers
 - a. Merrill Burrows (COO)
 - b. Stacey Villa (CFO)

Originally Privacy On Demand had only (1) owner (Scott Lyons) but has now added (2) Partners. These partners (Stacey Villa & Merrill Burrows) are now being added as Managers.

Thank you and if you have any unanswered questions or need further clarification, (2) partners contact information is listed below.

Scott Lyons

Cell: 813-477-4536

611 Washburn Rd, Unit #26

Melbourne Fl, 32934

Stacey Villa

Cell: 407-274-5015

Mower.stacey@gmail.com

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: PRIVACY ON DEMAND INC				
DOCUMENT NUMBER: PO6000141420				
The enclosed Articles of Amendment and fee are submitted for filling.				
Please return all correspondence concerning this matter to the following:				
Scott Lyons Name of Contact Person				
Name of Contact Person				
PRIVACY ON DEMAND INC Firm/Company				
Firm/ Company				
Melbourne FL 32934				
Address				
Melbourne FL 32934				
City/ State and Zip Code				
svilla@privacyondemandinc.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call: Stacey Villa 407 274 - 5015				
Stacey Villa at (407) 274 - 5015 Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301				

Articles of Amendment to Articles of Incorporation

16 JUL -6 PH 2:01

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Privacy on	clore	end	I Incsecretary in the
(Name of Corpora			Florida Dept. of State)
	P06000	<u></u>	*
(Doce	ument Number of (Corporation (if	known)
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	ida Statutes, this F	lorida Profit C	corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the	corporation:		
name must be distinguishable and contain the wa "Corp.," "Inc.," or Co.," or the designation "Conword "chartered," "professional association." or the	rp, " "Inc," or "C	o". A profess .A."	ional corporation name must contain the
B. Enter new principal office address, if applicab		611 Wa	ashburn Rd, Unit 26
(Principal office address <u>MUST BE A STREET AL</u>	ODRESS)		DURNE, F1 32934
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	9 <u>0X</u>)	lell Le Melb	Jashburn Rd, Unitalp ourne Fl, 32934
D. If amending the registered agent and/or regist new registered agent and/or the new registere		ss in Florida, e	enter the name of the
Name of New Registered Agent			
	(Florida stree	t address)	
New Registered Office Address:			. Florida
	(0	City)	(Zip Code)
New Registered Agent's Signature, if changing Relations I hereby accept the appointment as registered agent.		th and accept t	he obligations of the position.
Sig	gnature of New Reg	gistered 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	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	SV Sally	/ Smith	
Type of Action (Check One)	. <u>Title</u>	<u>Name</u> ·	<u>Addres</u> s
1) Change	<u>C00</u>	Merrill C. Burrows	2686 PINE SHADOW LANE
X Add			CLERMONT, FL 34711
Remove			
2) Change	CFO	STACEY M. Villa	2686 PINE SHADOW LANE
<u></u> ∤ Add			CLERMONT, FL 3471
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional	Iding additional Ar sheets, if necessary).	(Be specific)			
				<u>.</u>	
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provisions for in (if not applic	provides for an exc uplementing the am- able, indicate N/A)	endment if not co	ontained in the am	endment itself:	<u>.</u>
errill C.	Burrows -	12.5 % 5	share hold		·
taceu M.	Villa - 1	2.5 % S	hare hold	er	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7 111-1	<u> </u>		<u> </u>	

The date of each amendment(s) ad	option: 05/25/16	, if other than the
date this document was signed.	17	, it outer than are
Effective date if applicable:	05/25/16	
	05/25/16 (no more than 90 days after amendment file d	ate)
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirem partment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were sufficiently.	pted by the shareholders. The number of votes cast for the afficient for approval.	amendment(s)
	roved by the shareholders through voting groups. The followeach voting group entitled to vote separately on the amenda	
"The number of votes cast	For the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action an	d shareholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and sha	areholder
Dated_ Ole/	30/16	
	11-11:11	
Signature	stacy vuna	
	rector, president or other officer — if directors or officers ha l, by an incorporator — if in the hands of a receiver, trustee, or	
	ed fiduciary by that fiduciary)	of other court
	STACEY M. VILLA	
•	(Typed or printed name of person signing)	
	CFO	
•	(Title of person signing)	