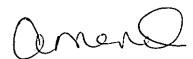
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BJR 1/27/14

COVER LETTER

Division of Corporations NAME OF CORPORATION: Hayden Home Team, Inc DOCUMENT NUMBER: P06000144960 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Kelly L Hayden Name of Contact Person Hayden Home Team, Inc. Firm/ Company 419 Barcelona Dr Address St. Petersburg, FL 33706 City/ State and Zip Code kelly.hayden1@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (727 Area Code & Daytime Telephone Number Patty Cole Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee ■ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed)

Mailing Address

TO: Amendment Section

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

is enclosed)

Articles of Amendment to

to
Articles of Incorporation
of

FILED

	2014 JAN 21 PM 5: 00
Hayden Home Team, Inc	
	vith the Florida Dept. of State OCKETARY OF STATE TALLAHASSEE, FLORIDA
206000144960	TALLAHASSEE
(Document Number of Corp	poration (if known)
Pursuant to the provisions of section 607.1006, Florida States Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendment(s
If amending name, enter the new name of the corpor	ation:
•	The new
	orporation," "company," or "incorporated" or the abbreviation inc," or "Co". A professional corporation name must contain the eviation "P.A."
B. Enter new principal office address, if applicable:	NA
Principal office address <u>MUST BE A STREET ADDRES</u>	NA NA
	NA
C. Enter new mailing address, if applicable:	NA
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	NA
	NA
D. If amending the registered agent and/or registered one mew registered agent and/or the new registered office	
Name of New Registered Agent	
NA	
	Florida street address)
New Registered Office Address: NA	Florida NA
	(City) (Zip Code)
``	(City) , Florida NA (Zip Code)
Signature of New Ro	egistered 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	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add Remove			
2) Change			
Add Remove			
3) Change			
Add Remove			
4) Change			
Add Remove			
5) Change			
Add			
Remove			
6) Change			
Remove			

(Alla	mending or adding additional Articles, enter change(s) here: such additional sheets, if necessary). (Be specific)
•	oration requires mandatory professional personal fitness classes to be taken by
ll off	ficers and employees of the corporation.
•	
<u>If a</u>	n amendment provides for an exchange, reclassification, or cancellation of issued shares,
pr	ovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
ΙA	

The date of each amendment	(s) adoption: 1-1-2014	, if other than the	
date this document was signed.			
Effective date if applicable:	1-1-2014		
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.		
	e approved by the shareholders through voting groups. The following statement d 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	"		
	by" (voting group)		
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder		
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder		
Dated 1-1-2	2014		
Signature	Musples		
	y a director, president or other officer - if directors or officers have not been		
	lected, by an incorporator — it in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)		
	Kelly L Hayden		
	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		