P07000001201

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DIVISION OF CORPORATIONS

MAR 2 3 2017

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COVER LETTER

T0: Amendment Section
Division of Corporations

NAME OF CORPORATION: LIFETIM	E LEGACIES, INC.
OOCUMENT NUMBER: <u>P07000002201</u>	
The enclosed Articles of Amendment and f	ee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Ded M.D.d.	
Barb McBride	Name of Contact Person
South Beach Tax & 1	Financial Services
Boun Boun Tax of	Firm/ Company
320 Osceola Avenue	
	Address
Jacksonville Beach,	FL 32250
	City/ State and Zip Code
E-mail address:	(to be used for future annual report notification)
For further information concerning this man	ter, please call:
Barb McBride Name of Contact Person	at (904) 241-2533 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

Articles of Amendment to Articles of Incorporation of

P07000002201	orporation as current	ly filed with the Florida Dent	of Choto) F 75
P07000002201		TO THE CONTROL OF THE POPE	Or State)
<u> </u>			1 8
	(Document Number o	f Corporation (if known)	瑞
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	6, Florida Statutes, this	Florida Profit Corporation ad	opts the following ambalim
A. If amending name, enter the new name	of the corporation:		
COLA HARRIS, INC.			The пе
name must be distinguishable and contain "Corp.," "Inc.," or Go.," or the designation word "chartered," "professional Association	on "Corp," "Inc," or '	'Co". A professional corpora	rated" or the abbreviatio tion name must contain th
B. <u>Enter new principal office address, if a</u> (Principal office address <u>MUST BE A STR</u>		N/A	
C. <u>Enter new mailing address, if applicab</u> (Mailing address <u>MAY BE A POST OF</u>		N/A	
D. If amending the registered agent and/onew registered agent and/or the new re	egistered office address		ie of the
Name of New Registered Agent N/	<u> </u>		
	(Florida st	reet address)	
New Registered Office Address: N/A	A.		. Florida
THE WITTERSTONE OF THE PROGRAMS.		(City)	(Zip Code)

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:

 $P = President; V = Vice President; \tilde{T} = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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.

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)	Title	<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			
Add			
Remove			

E: <u>If amending or additional Articles, enter change(s) here:</u> (Attach additional sheets, if necessary). (Be specific)
NI/A
N/A
To the annual months are vides for an explanation of a second shows
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
N/A

Effective date if applicable:		
, ,	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not partment of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement 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) ,,	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	613/1/17	
(By a/c	rector, president or other officer – if directors or officers have not been	
	d, by an incorporator – if in the hands of a receiver, trustee, or other court ded fiduciary by that fiduciary)	
	Cola H. Harris	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	