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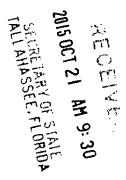
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PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Na	me)
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Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	

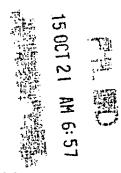
Office Use Only



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OCT 21 2015 C McNAIR

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COVER LETTER TO: Amendment Section Division of Corporations NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State:

Mailing Address

\$35 Filing Fee

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

□\$43.75 Filing Fee &

Certificate of Status

Street Address

□\$43.75 Filing Fee &

(Additional copy is

Certified Copy

enclosed)

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

□\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

Articles of Amendment

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	Articles of Incorpo	ration	***	a de
_	of		<u> </u>	6. C.
Eix	Woor. In	C.		S
(Name of Corporat	tion as currently file	d with the Florida De	pt. of State)	58.6
Po.	76000 3340	7		100
	ment Number of Corp			
Pursuant to the provisions of section 607.1006, Floridate Articles of Incorporation:	da Statutes, this <i>Flori</i>	da Profit Corporation :	adopts the followi	ng amendment(s)
A. If amending name, enter the new name of the c	corporation:			
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the	ord "corporation," " p," "Inc," or "Co".	compahy," or "incorp A professional corpo	porated" or the cration name must	The newabbreviation
3. Enter new principal office address, if applicabl Principal office address <u>MUST BE A STREET AD</u>				
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>	<u>ox</u>)			
). If amending the registered agent and/or registered new registered agent and/or the new registered		ı Florida, enter the na	nme of the	
Name of New Registered Agent				-
	(Florida street ad	dress)		_
New Registered Office Address:			. Florida	
The Magnitude of the Manager.	(City)			Code)
New Registered Agent's Signature, if changing Re hereby accept the appointment as registered agent.		and accept the obligation	ons of the position.	
Sie	nature of New Regist	ered 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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change				
Add				
Remove				
2) Change				
Add				
Remove			•	
3) Change				
Add				
Remove				
4) Change				
Add			· .	
Remove				
5) Change				
Add				
Remove				
6) Change				
Add			_	
Remove				

	s, if necessary). (Bo	e specific)	_		
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**************************************	ides for an exchange	ent if not contains	<u>or cancellation o</u> d in the amendr	f issued shares,	
nrovisions for implem	indiagra M/A)	one il not containe	a in the amenan	ent natit.	
provisions for implem (if not applicable,	maicale N/A)				
<u>provisions for implem</u>	maicule WA)				
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provisions for implem (if not applicable,	maicue (VA)				
provisions for implem (if not applicable,	maicue (VA)				

	(no more than 90 days after amendment file date)
Note: If the date inserted in this blocoument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adop by the shareholders was/were suff	ficient 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	or the amendment(s) was/were sufficient for approval
by	
	(voting group)
action was not required.	oted by the board of directors without shareholder action and shareholder oted by the incorporators without shareholder action and shareholder
selected	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	1 2000 / 2000
-	(Typed or printed name of person signing)