## P07000055569

(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Nam	e)
(Docur	ment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fili	ng Officer:	





700330598027

06/17/19--01015--010 \*\*35.00

2019 : "YO MH 3: 32

Amend

JUN 2 6 2019 I ALBRITTON

## COVER LETTER . :

TO: Amendment Section

Division of Corp	porations		·
NAME OF CORPO	RATION: ALLISON JAMES	, INC.	
	BER:P07000055569		<u></u>
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
	MATTHEW R. CRUMBAUG	ЭН	
		Name of Contact Person	l
	ALLISON JAMES INC.		
		Firm/ Company	
	2888 LOKER AVENUE E. S	SUITE 206	
		Address	
	CARLSBAD, CA 92010		
		City/ State and Zip Code	
MC	RUMBAUGH@AJICORPORA	ATE.COM	
	<del>=</del>	ed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
JILL W LEMONS		at (	875-3585
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	for the following amount made	payable to the Florida Depa	artment of State:
☐ \$35 Filing Fee	☐\$43.75 Filing Fee & 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			Address
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations Clifton Building	
P.O. Box 6327 Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

ALLISON JAMES, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P07000055569 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, succe dis name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) . Florida New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar 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 Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP		JAMES A. CRUMBAUGH	2812 RYAN BLVD
X Add		_		PUNTA GORDA, FL 33950
Remove				-
2) Change		<del></del>		
Add				
Remove				
3 ) Change		_		
Add				<u> </u>
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				<del></del> .
Remove				
6) Change				
Add				
Remove				<u></u>

If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)
<del> </del>	
<del></del>	
	<del></del>
	10 10 10 10 10 10 10 10 10 10 10 10 10 1
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adopti	ор:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		-
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departr	does not meet the applicable statutory filing requirements, this date will nent of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) ent for approval.	
	d by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the	ne amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
JUNE 11, 2019 Dated	<del></del>	
Signature		
selected, by	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)	_
MA	TTHEW R. CRUMBAUGH	
	(Typed or printed name of person signing)	<del></del>
PRE	SIDENT	
	(Title of person signing)	-