P07000070592

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SEGRETARY OF STAKE DIVISION OF CORPORATIONS

CLEWAR 8 2016

COVER LETTER

Division of Corporations				
NAME OF CORPORATION: 16616 & SWFL LNC.				
DOCUMENT NUMBER: P07000070592				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Name of Contact Person				
COSC WOOLW 164				
709 Care Coral Play W.				
Case Coval 1-L 33914				
City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Lawrence Swan at (239) 540-2612				
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) \$43.75 Filing Fee Certified Copy (Additional Copy is 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

Articles of Amendment to

Articles of Incorporation

16 616 8	CINIFI INC. 15 JUN 30 AM 9: 57
(Name of Corporation as	currently filed with the Florida Dept. of State)
(202000)	070592
(Document N	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendment(s) to
name must be distinguishable and contain the word "co	orporation," "company," or "incorporated" or the abbreviation nc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	3314 SW 15th HUL Care Coval FL 33914
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	As About.
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent	
	Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	
Signature	e 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.

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)	<u>Title</u>	Name	Address
1) Change	7	Gary Jelmelt	3314 SW 15th 1946
Add			Care Coral
Remove			FL 33914
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)			
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f an amendment provides for an exclusions for implementing the ame	endment if not cont	ained in the amer	idment itself:	165.
(if not applicable, indicate N/A)				
			pus .	
				

The date of each amendment(s) adoption:	FULLY, if other than the
date this document was signed.	SPERETARY OF STATE DIVISION OF GORPERATIONS
Effective date <u>if applicable</u> :	nys after amendment file date) 15 JUN 30 AM 9: 57
(no more than 90 ac	lys after amenament file date) 15 JUN 30 Riv 3
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	nber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes cast for the amendment(s) was/were su	officient for approval
by	,»
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors wit action was not required.	hout shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators without action was not required.	shareholder action and shareholder
Dated 6 - 22 - 15.	<u> </u>
Dated 6 - 22 - 15. Signature Lay 1 Au	·
(By a director, president or other officer	if directors or officers have not been
selected, by an incorporator - if in the ha	ands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)	
GARY YO	elinek.
(Typed or printed nan	ne of person signing)
Ponce	clout.
	person signing)
(···· 1	