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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone#	()
PICK-UP	WAIT	MAIL
(В	usiness Entity Name)
(De	ocument Number)	
Certified Copies	Certificates o	f Status
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COVER LETTER

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: Firm/ Company For further information concerning this matter, please call: 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 □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

Division of Corporations

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

Articles of the	orboration ,
of	
Uston (loset Solutions, Inc.
(Name of Corporation as current	y filed with the Florida Dept. of State)
200100	783413
(Document Number of	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	اري م
(1 melpus office duditess in 1002 DD it Danibar in 1002 DD it	
C. Francisco address if amiliable.	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	م المارية
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent	ory Thomas Cramer
8736 SE ALG	ibama place
(riorida sii	
New Registered Office Address:	50000 Florida 334.55
	(City) (Zip Code)
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)

Remove

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: XChange	<u>PT</u>	John D	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	mith_	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	CEC	<u>)</u>	Gregory Thomas Ceaner	9736 SE Alabama Place Hobe Sound, 71
Add Remove				33465
2) Change		_		
Add				
Remove				
3)Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change	-			
Add				

n amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	mending or adding additional Artical Artical ach additional sheets, if necessary).	(Be specific)
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		(if not applicable, indicate N/A)	nament if not contained in the amendment fixen:
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The date of each amendment(s) adop	tion:, if other t	than the
date this document was signed.	1611	
Effective date if applicable:	10115115	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocdocument's effective date on the Department.	ek does not meet the applicable statutory filing requirements, this date will not be listed timent of State's records.	d as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were suffice.	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	ved by the shareholders through voting groups. The following statement ch 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 Kachel (lar	er and Joseph Cramer." (voting group)	
☐ The amendment(s) was/were adopted action was not required.	ed by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted action was not required.	ed by the incorporators without shareholder action and shareholder	
Dated	10/15/15	
Signature	The Camer	
	ctor, 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 fiduciary by that fiduciary)	
аррошес	induciary by that induciary)	
	'Lachel Ceamere	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	