P07000086806

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SEURETARY OF STATE TALLAHASSEE, FLORUD

Anund ne

OCT 2 9 2017

T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	The Audit F	eople Corp	
DOCUMENT NUME	_{ER:} P070008680	6	
	of Amendment and fee are sul		
Please return all corres	pondence concerning this mat	ter to the following:	
	Mark Toutain		
		Name of Contact Persor)
	The Audit People	Corp	
	00455	Firm/ Company	 -
	3815 Painted Bur	iting Way	
		Address	
	Jacksonville, FL.	32224	
		City/ State and Zip Code	2
Ma	rk.Toutain@auditr	people net	
		ed for future annual report	notification)
		•	,
For further information	n concerning this matter, pleas	e call:	
Mark Toutain		at (904	, 200-2995
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 phassee, F1, 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



The Audit People Corp

(Name of Corporation as currently filed with the Florida Dept. of State)

P0/000086806		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Flor its Articles of Incorporation:	ida Statutes, this <i>Floridu Profit Cor</i>	poration adopts the following amendment
A. If amending name, enter the new name of the	corporation:	
The Audit People Corporation		The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered." "professional association," or t	orp," "Inc," or "Co". A profession	r "incorporated" or the abbreviation nal corporation name must contain the
B. Enter new principal office address, if applica		
(Principal office address <u>MUST BE A STREET A.</u>	DDRESS)	
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE I	<u> </u>	
D. If amonding the aggistered areas and so do a great		
 If amending the registered agent and/or registered agent and/or the new registered. 		ter the name of the
Name of New Registered Agent		
Name of New Registered Agent		
 	(Florida street address)	in the second se
New Registered Office Address:		Florida
Hen Registered typice framess.	(City)	(Zip Code)
New Registered Agent's Signature, if changing R		Alband on Calman St
I hereby accept the appointment as registered agen-	і. — ғат запинағ улы апа ассері іпе	obugations of the position.
		<u>. </u>

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)

. 5

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1)Change	V	Dale Hawk	147 Water Oak Drive
X Add			Ponte Vedra
Remove			Florida 32082
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	<u> </u>		
Add			
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Remove			

(Attach additional sheets, if necessary)	(Be specific)	
		-

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···		
and the second states of the s		

Address Addres		
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:	
(if not applicable, indicate N/A) Exchange of the Total 1,0)00 shares as follows:	
Mark Toutain - Remove 4		
Dale Hawk - Add 450 sha	ares	 -

, ,

The date of each amendment(s)	adoption: 10/24/2012
Effective date <u>if applicable</u> : 1/	/1/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
	st for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder
Dated10/1 Signature	5/2012 MAT
(By a select	director, president or other officer – if directors or officers have not been led, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Mark Toutain
	(Typed or printed name of person signing)
	President
	(Title of person signing)

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