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C. CARROTHERS

COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: JOKY Inc.
DOCUMENT NUMBER: P0700093513
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jonathan Barreras Name of Contact Person
Firm/ Company
6446 Oakpoint Dr
Lakeland FL. 33813 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jonathan Barreras at (407) 744-3512 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:
S35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee. FL 32301

Articles of Amendment

	Articles of Incorporation	5			
	of	HAR			
JOKY Inc					
(Name of Corporation as currently filed with the Florida Dept. of State)					
PO 1000	10 10515	Tigg PR			
·	r of Corporation (if known)	第三			
Pursuant to the provisions of section 607.1006, Flo its Articles of Incorporation:	orida Statutes, this Florida Profit Corporation	n adopts the following amendment(s)			
A. If amending name, enter the new name of the	e corporation:				
Jonathan B	barreras P.A.	The new			
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or	orp," "Inc," or "Co". A professional corp				
B. Enter new principal office address, if application (Principal office address MUST BE A STREET A					
					
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE</u>	<i>BOX</i>)				
D. If amending the registered agent and/or reginew registered agent and/or the new register		name of the			
Name of New Registered Agent	• • • • • • • • • • • • • • • • • • •	_			
 	(Florida street address)				
New Registered Office Address:	, Flor	ida			
	(City)	(Zip Code)			
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen		tions of the position.			
Signature o	f 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 De	<u>se</u>				
X Remove	<u>v</u>	Mike Jones					
X Add	<u>sv</u>	Sally Sn	<u>aith</u>				
Type of Action (Check One)	<u>Title</u>		Name		Address		
1) Change				-			
Add							
Remove							
2) Change				-	1.0000		
Add							
Remove							
3) Change				-			
Add							
Remove							
4) Change							
Add							
Remove							
5) Change		_					
Add							
Remove					_		
6) Change							
Add							
Remove				•			

E. <u>If amending or add</u> (Attach <i>additional sl</i>		/D		_		_
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. <u>If an amendment p</u>	provides for an excl	hange, reclass	ification, or ca	ncellation of is	sued shares,	
(if not applica	olementing the ame ble, indicate N/A)	enament it no	t contained in	tne amenament	itseir:	
			·			
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The date of each amendment(s) add date this document was signed.	pption:	, if other than th
_		
Effective date if applicable:	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop by the shareholders was/were suff	sted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement ach 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)	
	(voting group)	
The amendment(s) was/were adoptaction was not required.	ted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted action was not required.	ted by the incorporators without shareholder action and shareholder	
(By a dir selected.	coor, 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 d fiduciary by that fiduciary)	***
-	Jonathan Barreras (Typed or printed name of person signing)	_
-	President (Title of person signing)	