PONCO 130508

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)
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SEP -4 AH &

COVER LETTER

A.

TO: Amendment Section Division of Corpora				
NAME OF CORPORA	TION: SHOB	Corporation	<u> </u>	
DOCUMENT NUMBE	r: <u>P07000</u>	130508		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all correspo	ondence concerning this mat	iter to the following:		
_	Mathew	O'Brien Name of Contact Person		
		Name of Contact Person	n	
SHOB Corporation Firm/Company				
_	<u>1709 SW</u>	49th Place		
		•		
_	Gainesville,	F1 32608 City/ State and Zip Code		
		City/ State and Zip Code	c	
JE-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Mathew	O'Brien	at (352	de & Daytime Telephone Number	
Name of	Contact Person	Area Co	de & 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 & 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)	
Mailin	ı <u>g Address</u>	Street	Address	
	lment Section		Iment Section	
Divisio	on of Corporations	Divisio	on of Corporations	
P.O. Box 6327		Clifton Building		
Tallah	assee, FL 32314	2661 E	xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

SHOB Corporation		
(Name of Corporation as currently	y filed with the Florida Dept. of Sta	ite)
<u> </u>		
(Document Number of	Corporation (if known)	-
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the	e following amendment(s) to
A. If amending name, enter the new name of the corporation:		
· 114 -		The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "	Co". A professional corporation na	or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NA	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	₩A	18 SEP -1
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:		
Name of New Registered Agent - 1 A -		
(Florida stre	eet address)	
New Registered Office Address: - N A -	(City)	a (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		
	egistered 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	PT John Doe	
X Remove	V Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1)Change	P.S. Assistant Jeine Shapiro	1709 SW 49th PI
Add		Gainesville, FL
X Remove		37608
2) Change		
Add		
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6)Change		
Add		
Remove		

- ·	cles, enter change(s) he (Be specific)	<u>:1¢</u> .		
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lf an amendment provides for an excl				
provisions for implementing the ame (if not applicable, indicate N/A)				
provisions for implementing the ame (if not applicable, indicate N/A)				
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provisions for implementing the ame (if not applicable, indicate N/A)				
of not applicable, indicate N/A)				

The date of each amendment(s) adoption:date this document was signed.	8/27/18	, if other than the
date this document was signed.	1 1 -	
Effective date if applicable:	8/27/12 (no more than 90 days after amendment file	
	(no more than 90 days after amendment file	date)
Note: If the date inserted in this block does document's effective date on the Department o	not meet the applicable statutory filing require f State's records.	ments, this date will not be listed as the
Adoption of Amendment(s) (Cl	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the approval.	e amendment(s)
	he shareholders through voting groups. The foll g group entitled to vote separately on the amen	
"The number of votes cast for the ame	endment(s) was/were sufficient for approval	
by	oting group)	
(va	oting group)	
action was not required.	e board of directors without shareholder action at incorporators without shareholder action and s	
action was not required.	i moorpoidens widtode shareholder decton died s	id Cito id Ci
Dated8/27/10	tew J. O'Brien	
Signature Mot	tew J. O'Brien	
(By a director, pre	sident or other officer - if directors or officers h	
	corporator – if in the hands of a receiver, trustee by by that fiduciary)	, or other court
$-f^{\gamma}$	athew J. O'Brien	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	

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