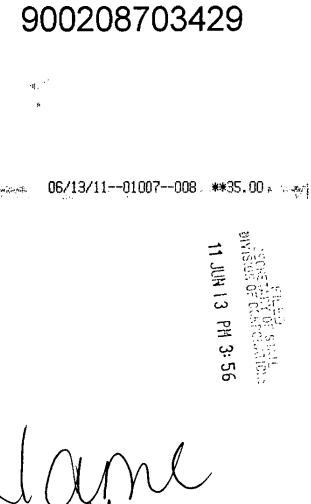
(Requestor's Name)	
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TO: Amendment Section Division of Corporations	
	FULLER P.A.
DOCUMENT NUMBER: PO	7000/3/682
The enclosed Articles of Amendment and fee are s	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
- JAm. Name	ES D. HullER of Contact Person
<u>√. ⊅.</u> Fi	FULLER P.A.
1023	PADDINGTON TER.
City/s E-mail address: (to be used for	State and Zip Code Claw a Amail. com future annual report notification)
For further information concerning this matter, plea	ase call:
Name of Contact Person	at (407) 340 1134 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	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address 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 of

<u>J. D.</u>	FULLE	R. P.	<i>A</i> .	
(Name of Corporation as curr	ently filed with the Flo	orida Dept. of S	State)	
	07000 13	3/682		
(Document Nur	nber of Corporation (if	known)		
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, thi	is <i>Florida Prof</i>	it Corporation ac	dopts the following
A. If amending name, enter the new name o	f the corporation:			
Alames	S.D. Fu	LER	R.A.	The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	the word "corporation designation" (Corp."	n," "company, "Inc," or "Co"	" or "incorpora". A professional	ited" or the
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>		NA	<u>.</u>	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI		J A		10 PH 3: 56
D. If amending the registered agent and/or new registered agent and/or the new registered.		ess in Florida, e	enter the name of	<u>f the</u>
Name of New Registered Agent:	NA	<u> </u>	·	
New Registered Office Address:	(Florida stre	eet address)		
	(City)		, Florida Zip Code)	
New Registered Agent's Signature, if changing the hereby accept the appointment as registered a	ng Registered Agent:			he position.
	Isonature of New Regist	tered Agent if a	hanaina	

	and title, name, and address of				rector being
Attach aa	lditional sheets, if necessary)	N. A			
<u> Title</u>	<u>Name</u>	/v. 7	Address		Tune of Action
THE	Name		Address		Type of Action
				···········	_ 🔲 Add
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E. If ame	nding or adding additional Art	ticles, enter cl	hange(s) here:		
	additional sheets, if necessary).		/	U- 4.	
					
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<u></u>					
f Ifana	umendment provides for an exc	ahanga maalag	osification or cano	allation of ign	wad shawa
	ions for implementing the ame				
(if	not applicable, indicate N/A)	12.6	7		
		/	1 -		
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	<u> </u>				

The date of each amendment(s	
Effective date if applicable:	(date of adoption is required) 10 more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	oting group)
(oting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated	WWE 10,2011
select	director, president or other officer – if directors or officers have not been and, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)