P08000019908

| (Re | questor's Name) | |
|-------------------------|--------------------|-------------|
| (Ad | dress) | |
| , (Ad | dress) | |
| (Cit | ry/State/Zip/Phone | e #) |
| PICK-UP | MAIT WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| · (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | · | |
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Office Use Only



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Amend + N/C

AUG 1 6 2012

T. BROWN

COVER LETTER

| Division of Corpo | | | |
|--------------------------|--|------------------------------------|---|
| NAME OF CORPOR | ATION: 6000 | DOG, INC. | |
| DOCUMENT NUMB | EATION: <u>6000</u> DER: <u>P080</u> | 00019908 | |
| | of Amendment and fee are su | | |
| Please return all corres | pondence concerning this ma | atter to the following: | |
| | DONNA A | Name of Contact Person | |
| • | | Name of Contact Perso | n |
| | THE NIVE | TARE NILVE MI | Para Parks Torr |
| - | THE CEIVE | Firm/ Company | C COMPANY INC. |
| | <i>*</i> *********************************** | The Company | 1 C 1 = #== |
| - | 303 EASTS | JACKSON STRE | ct, SwiTE #510 |
| | 7 | Address | ŕ |
| _ | IAMPA 1-1 | 2 33602 City/ State and Zip Cod | |
| | , | City/ State and Zip Cod | e |
| | م محمد عمد بعدم المعاملات | | |
| | E-mail address: (to be u | OMCAST , NE) | notification) |
| | D-man address. (to be di | sed for ruture annual report | nouncation) |
| For further information | concerning this matter, pleas | se call: | |
| DONNA | A. WORLES | 941 |) 315-1080 de & Daytime Telephone Number |
| Name o | f Contact Person | Area Co | de & Davtime Telephone Number |
| | | | |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | artment of State: |
| \$35 Filing Fee | □\$43.75 Filing Fee & | □\$43.75 Filing Fee & | □\$52,50 Filing Fee |
| ■ \$55 imigree | Certificate of Status | Certified Copy | Certificate of Status |
| | | (Additional copy is | Certified Copy |
| | | enclosed) | (Additional Copy |
| | | | is enclosed) |
| Maili | ing Address | Street | Address |
| Amendment Section | | Amendment Section | |
| | ion of Corporations | Division of Corporations | |
| | Box 6327 | | Building |
| Tallal | hassee, FL 32314 | 2661 E | xecutive Center Circle |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



| Com Do To | •• | | 7/1/2 | 2. 36 |
|---|---------------------|----------------------------------|--|----------|
| GOOD DOG, INC. | filed with the El | orida Dant of State) | | ୍ଚ |
| | | | | |
| P080000/9908 (Document Number of | of Corneration (if | known) | | |
| • | • | • | | |
| Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation: | da Statutes, this I | ilorida Profit Corporation ado | pts the following amendmer | ıt(s) to |
| A. If amending name, enter the new name of the | corporation; | | | |
| THE OLIVE TREE OLIVE O'L name must be distinguishable and contain the wo | COMPANU | . INC. | The new | |
| name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Cor, word "chartered," "professional association," or the | p," "Inc," or "C | Co". A professional corporati | zied" or the abbreviation on name must contain the | |
| B. Enter new principal office address, if applicable | le: | 503 EAST VAC | KSON STREET | |
| (Principal office address <u>MUST BE A STREET AD</u> | | Suite #510 | | |
| | | TAMPA, FL 3. | 3602 | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Bo | <u>ox</u>) | | | |
| D. If amending the registered agent and/or registence new registered agent and/or the new registered. | | | of the | |
| Name of New Registered Agent | A | | | |
| | (m) | | | |
| | (Florida stre | | | |
| New Registered Office Address: N/ | (City) | , Florida | (Zin Code) | |
| | | | (Dip cont) | |
| New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent. | | ith and accept the obligations o | of the position. | |
| | · | | - | |
| Signature of N | lew Registered As | gent, 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 | <u>PT</u> | John Doc | |
|-------------------------------|--------------|-------------|---------------------------------------|
| 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 | | N/A | |
| Add | | , | |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | · · · · · · · · · · · · · · · · · · · |
| Add | | | |
| Remove | | | |
| Kemove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | - | | |
| Remove | | | |

| If amending or adding additional Arti (Attach additional sheets, if necessary). | icles, enter change(s) here: (Be specific) |
|--|---|
| N/A | |
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| If an amendment provides for an each | nange, reclassification, or cancellation of issued shares, |
| provisions for implementing the amer | ndment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) | |
| N/A | |
| | |
| | |
| | A SAME AND |
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| | |

| The date of each amendme | nt(s) adeption: 8/9/12 |
|---|---|
| Effective date if applicable | · |
| | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/w by the shareholders was/v | were adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval. |
| | ere approved by the shareholders through voting groups. The following statement ded for each voting group entitled to vote separately on the amendment(s): |
| "The number of vot | es cast for the amendment(s) was/were sufficient for approval |
| by | (voling group) |
| The amendment(s) was/w action was not required. | ere adopted by the board of directors without shareholder action and shareholder |
| The amendment(s) was/w action was not required. | ere adopted by the incorporators without shareholder action and shareholder |
| : | By a director, president or other officer—if directors or officers have not been selected, by an incorporator—if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) |
| | |
| | (Typed or printed name of person signing) |
| | PRESIDENT |
| | (Title of person signing) |