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C. LEWIS
SEP 3 2014
EXAMINER

COVER LETTER

Division of Corporations NAME OF CORPORATION: ALL ANGLES RC INC 26-2136739 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ROBERT W CARR

Name of Contact Person ALL ANGLES RC INC LITTLE QUPRESS WINTER PARK, FLORIDA

City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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



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	10
	Articles of Incorporation
	of
Il Angles RC Inc	

(Name of Corporation as currently filed with the I	Florida Dept. of State)
262136739 POSODO2539	13
(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 following amendment(s) t
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	3000 Little Cypress Cove
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Winter Park
	Florida 32792
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3000 Little Cypress Cove
(Winter Park
	Florida 32792
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	
Name of New Registered Agent	
(Florida st	reet address)
New Registered Office Address:	, Florida
(City,	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
. , ,,	. 3 , 1
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)

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 <math>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:	. and Ban	y omini, or us un mua.	
X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>s</u>	Ryan P Carr	3000 Little Cypress Cove
Add			
Remove			Winter Park, FI 32792
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) L Change	-	·	<u> </u>
Add			
Remove			

If amending or adding additional Art Attach additional sheets, if necessary).	icies, enter change(s) here: (Re specific)
Attach additional sheets, if necessary).	(be specific)
	
· · · · · ·	
<u>If an amendment provides for an excl</u>	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	
	····

	August 20, 2014		OF GATE	të udhan dhan dha
date this document was signed	t(s) adoption: August 20, 2014	<u> </u>	, 11 (P1 11314)	_, if other than the
Effective date if applicable:	 August 20, 2014	14 AUG 25	PH 1:43	
Effective date <u>it appreasie</u> .	(no more than 90 days a	fter amendment file date	?)	-
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
	re adopted by the shareholders. The number ere sufficient for approval.	r of votes cast for the am	endment(s)	
	re approved by the shareholders through vot ed for each voting group entitled to vote sep			
"The number of vote	s east for the amendment(s) was/were suffici	ent for approval		
by	(voting group)	,,,		
	(voting group)			
The amendment(s) was/we action was not required.	re adopted by the board of directors without	shareholder action and	shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shar	eholder action and share	eholder	
Dated Aug	just 20, 2014			
Signature	Matt V. Com			
(I s	y a director, president or other officer – if celected, by an incorporator – if in the hands ppointed fiduciary by that fiduciary)			_
	Robert W Carr			
	(Typed or printed n	ame of person signing)		_
	President/Treasurer			
	(Title of pe	rson signing)		_