P08000033005

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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Insco Industries, Inc. DOCUMENT NUMBER: P08000033005 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Connie E. Insco Name of Contact Person Insco Industries, Inc. Firm/ Company 1561 NE 9th Court Address Homestead, FL 33033 City/ State and Zip Code cinsco@comcast.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Connie Insco Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee **35** Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

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Insco Industries, Inc.	12 APR 12 PH 4: 11
(Name of Corporation as currently filed with the Florid	a Dept. of State)
P08000033005	SECRETARY OF STATE SECRETARY OF STATE TALLAHASSEE PLORIDA
(Document Number of Corporation (if known	wn)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Floria</i> its Articles of Incorporation:	da Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Tripleye, Inc.	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable:	company," or "incorporated" or the abbreviation A professional corporation name must contain the
(Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Donl
D. If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:	ı Florida, enter the name of the
Name of New Registered Agent (Florida street ad	dress)
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 with a	nd accept the obligations of the position.
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)

Example:

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 Doe			
X Remove	<u>V</u> .	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) Change Add Remove					
2) Change Add Remove					
3) Change Add Remove			1		
4) Change Add Remove	/				
5) Change Add Remove	/				
6) Change Add Remove					

	onal sheets, if necessary).				
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an amendn	ent provides for an excl	nange, reclassif	ication, or canc	ellation of issue	ed shares,
rovisions fo	ent provides for an exch r implementing the ame	endment if not o	ontained in the	amendment it	self:
	plicable, indicate N/A)				
_	19/14		•		
	,				
				<u>"</u> ,	
			-	 _	

The date of each amendment	(s) adoption: 4/9/2012
Effective date if applicable:	4/9/2012
Effective date it applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wei	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
☐ The amendment(s) was/wei must be separately provide	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated 4/9	/2012
Signature	Coulie Ethyco
(E	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court proported fiduciary by that fiduciary)
	Connie E Insco
	(Typed or printed name of person signing)
	Vice President
	(Title of person signing)