

PD80000649717

Square One Services Inc

575 NW Mercantile Pl Suite 114 Port St Lucie FL 34988

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

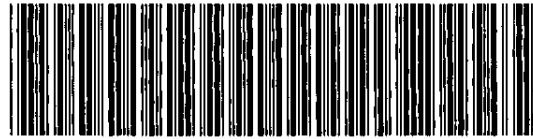
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/01/12--01019--007 **43.75

12 NOV - 1 PM 12:17

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Amend/cc
@ 11/2/12

Articles of Amendment
to
Articles of Incorporation
of

12 NOV -1 PM 12:17

Square One Services, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

PO8000049717

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

575^W Mercantile Place
Suite 114
Port Saint Lucie, FL 34986

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

575^W Mercantile Place
Suite 114
Port Saint Lucie FL 34986

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address: 575^W Mercantile Place #114, Florida 34986
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

Please add Tanya Carrier to my Articles as
Vice President with 50% share ownership

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:**

(if not applicable, indicate N/A)

Please amend Articles to reflect the
following officers with the following
% of issued shares:

William Carrier 50%

Tanya Carrier 50%

The date of each amendment(s) adoption: 11/17/12

Effective date if applicable: 11/17/12
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 10/30/12

Signature

William D. Carrier
(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)

William D. Carrier

(Typed or printed name of person signing)

President

(Title of person signing)