P08000053081

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COVER LETTER

TO: Amendment Section Division of Corporations							
NAME OF CORPORATION: 6 +T OF MC The							
DOCUMENT NUMBER: P08000053081							
The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
Translatonton							
Name of Contact Person							
TTIFLOW AC + HENTING							
Firm/ Company							
Address							
STUART 12 349 94 City/ State and Zip Code							
City/ State and Zip Code							
E-mail address: (to be used for future argual report notification)							
For further information concerning this matter, please call:							
Tracy Valentino #1772,781-2665							
Name of Contact Person Area Code & Daytime Telephone Number							
Enclosed is a check for the following amount made payable to the Florida Department of State:							
S35 Filing Fee & Certificate of Status (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)							
Mailing AddressStreet AddressAmendment SectionAmendment Section							

Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation

FILED

	Articles of Incorporation	116	
G+TOFMC, J	of En =	2114 SEP 24	
(Name of Corporation as currently	filed with the Florida Dept. of	State) of the line is	UFSTATE
14080000530	81	State); ECKETART JALLAHASSI	EE, FEURIDA
(Document Number of	of Corporation (if known)	,	
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	da Statutes, this Florida Profit C	orporation adopts the	ne following amendment(s)
A. If amending name, enter the new name of the	<u>corporation:</u>		The new
name must be distinguishable and contain the we	ord "corporation." "company."	or "incorporated"	
"Corp.," "Inc.," or Co.," or the designation "Cor	rp," "Inc," or "Co". A profess		
word "chartered," "professional association," or th	ne abbreviation "P.A."	1/. 1	
B. Enter new principal office address, if applicab	NO THEYESE	- VALENT	100
Principal office address MUST BE A STREET AL		<u> </u>	
	- 70 vs 1	JIXIETT	9770 (
	Strang	L FL 2	4991
	O <u>(0434</u>		
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE B</u>	(OX)		
	Ma		
•	!		
D. If amending the registered agent and/or regist	ered affice address in Florida 6	enter the name of th	16
new registered agent and/or the new registere		atter the haine of the	<u></u>
la			
Name of New Registered Agent	<u>u</u>		
	(Florida street address)	·	
New Registered Office Address:		. Florida	
New Registered Office Address.	(City)		p Code)
	. 37		,
New Registered Agent's Signature, if changing Re	egistered Agent:		
hereby accept the appointment as registered agent.	I am familiar with and accept t	he obligations of the	position.
r) hi	•	
Signature of	New Registered Agent, if changin		
Signature of 1	vew Registerea Agent, ij changin	\$	

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.

Example:	,	y Smith, St. M. M. Haw.	
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>	Name	<u>Addres</u> s
1) Change	VP.	Daniel W Shoverge	2 1164 NE Crown Tax Jenson Bel Fr
Add		<i>J</i>	Jenson Beh Fi
Remove			34957
2) Change			
Add			
Remove			
3) Change	_		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	,		
Add			
Remove		,	
6) Change			
Add			
Remove			

C. <u>If ari</u>	<mark>iending or ad</mark> ch <i>additional</i> s	ding additio	nal Article	s, enter cha	nge(s) here:			
(Attac	en adaltional s	ineets, ij nece	essary). (ве ѕресіліс)				
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lf an	amendment i	orovides for	an exchan	ge, reclassifi	cation, or ca	ncéllation of	issued share	S.
prov	<u>visions for im</u>	plementing 1	the amendr	nent if not c	ontained in	the amendm	ent itself:	-
	(if not applica	ible, indicate	N/A)					
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	<u></u>	14						<u>-</u>
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		<u>-</u> -						<u></u>
								
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	<u> </u>							

9/2/14	
The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: 9214	
Effective date if applicable: (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 9/12/14 Then 12	
Signature (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)	_
(Typed of printed name of person signing)	
TES 1021+	
(Title of person signing)	
CHRISTINE A JORDAN MY COMMISSION # EE117315 EXPIRES July 31, 2015	

FioridaNotaryService.com