## 7090000000055

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SECRETARIAN SELECTION

OCT 0 1 2014

C. CARROTHERS

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

Division of Corp.	Stations		
NAME OF CORPOR	RATION: RD HUBBA	RD GROUP INC	<u> </u>
DOCUMENT NUMI	BER: P0900000605	5	
	of Amendment and fee are sul		
Please return all corres	spondence concerning this mat	ter to the following:	
	DIANA HUBBARI	D	
		Name of Contact Person	
	MCDONALD & O		
		Firm/ Company	
	9120 CORSEA D	EL FONTANA V	VAY
		Address	
	NAPLES, FL 341	09	
		City/ State and Zip Code	<b>;</b>
dhi	ubbard@mo-cpa.d	rom	
<del>- un</del>		ed for future annual report	- atification)
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
DIANA HUBI	BARD	<sub>at (</sub> 239	, 254-8161
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ma	iling Address	Street	Address
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		Clifton Building	
Tal	lahassee, FL 32314	2661 E	xecutive Center Circle
		Tallahassee, FL 32301	

## Articles of Amendment Articles of Incorporation of

The State St

據 SEP 22 PM 3:

## RDHUBBARD GROUP INC

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

SECRETARY OF THE SECRET

P09000000055			3.
(Documen	nt Number of Corporation	(if known)	<del></del>
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporat	ion adopts the following amendm
A. If amending name, enter the new na	ame of the corporation:		
DHUBBARD INC			The nev
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional co	corporated" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		9120 CORSEA D	EL FONTANA WAY
		NAPLES, FL	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SAME	
D. If amending the registered agent ar			e name of the
new registered agent and/or the ne		<del></del>	
Name of New Registered Agent	DIANA HUBBA		<del></del>
		DEL FONTANA W	/AY
	,	street address)	24400
New Registered Office Address:	NAPLES	, F1	lorida 34109 (Zip Code)
	(Cit	(V)	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Age	nt:	
I hereby accept the appointment as regis			zations of the position.
	ma Kubba		<del>- ,</del>
Si	gnature of New Registered	d Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, na 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 Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each 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. 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 Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:	е, ина за	ny Smith, SV as an Ada.	
X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	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	Р	Ross Hubbard	28359 Altessa Way
Add			Bonita Springs, Fl 34135
Remove			
2) Change	Р	Diana Hubbard	9120 Corsea Del Fontana
Add			Way
Remove			Naples, Fl 34135
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
,			
6) Change			
Add			
Remove			

If amending or adding additional Article (Attach additional sheets, if necessary).	
/A	
<del></del>	
*	
	<del></del>
. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	<b>D</b>
Cancellation of issued shares by	/ Ross Hubbard

The date of each amendment(s) adoption: 9/15/14 , if o	othe.
date this document was signed.	
Effective date if applicable: N/A	
(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)	
(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_9/15/14	
Signature Diana Kubbaud	
(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)	
Diana Hubbard	
(Typed or printed name of person signing)	
President	
(Title of person signing)	