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14 APR -7 PM 2: 08
SECRETARY OF STATE
TALLABASSEE, FLORIDA

APR 1 4 2014

C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Felix Assoc	ciates of Florida,	Inc.			
DOCUMENT NUMBER: P09000023795					
The enclosed Articles of Amendment and fee are su	bmitted for filing.				
Please return all correspondence concerning this mat	tter to the following:				
Tom Pastore					
, , ,	Name of Contact Person				
Felix Associateso	f Florida, Inc.				
	Firm/ Company				
8526 SW Kansas	Avenue				
	Address				
Stuart Florida 349	997				
	City/ State and Zip Code	;			
tpastore@felixassoci	ates.net				
	sed for future annual report	notification)			
For further information concerning this matter, pleas	se call:				
Tom Pastore 220-2722					
Name of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for the following amount made p	payable to the Florida Depa	rtment of State:			
\$35 Filing Fee \$\times \text{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)			
Mailing Address 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 Articles of Incorporation



Felix Associates of Florida, Inc.

14 APR -7 PM 2:08

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

SECRETARY OF STATE

P09000023795			TALLAHASSEE, FLO
(Docume	nt Number of Corporation (i	f known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation add	opts the following amendment
A. If amending name, enter the new n	ame of the corporation:		
N/A			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associations of the contract of t	nation "Corp," "Inc," or "	Co". A professional corporal	rated" or the abbreviation
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable:	N/A	
	······································		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
D. If amending the registered agent an new registered agent and/or the ne			e of the
Name of New Registered Agent	N/A		
	(Florida str	eet address)	
New Registered Office Address:	N/A (City)	, Florida_	(Zip Code)
N. B. C. M. C. C. C.			,
New Registered Agent's Signature, if c I hereby accept the appointment as registered.			of the position.
	anature 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 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: 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	V	Michael V. Petrillo	335 Center Avene			
Add			Mamaroneck NY 10543			
Remove						
2) Change	V	Felix J. Petrillo	335 Center Avenue			
Add			Mamaroneck NY 10543			
Remove						
3) Change	٧	Bradley Missler	4320 Windsor Centr Trail			
Add			Suite 500			
Remove			Flower Mound TX 75028			
4) Change	<u>v</u>	Thomas Pastore	8526 SW Kansas Avenue			
✓ Add			Stuart FL 34997			
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						
I LIXEIIIOVE						

	ng or adding ad ditional sheets, i		l <mark>es, enter cha</mark> (Be specific)	nge(s) here:			
N/A	,	2,					
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provision	ndment provid ns for implement of applicable, in	nting the amen	nge, reclassif dment if not o	ication, or car contained in t	ncellation of i he amendmen	ssued shares, t itself:	
N/A	н аррисаоге, т	uicaie IVA)					
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The date of each amendment(s) adoption: 06/30/2013	, if other than the
date this document was signed.	
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 amend by the shareholders was/were sufficient for approval.	lment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following smust 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.	reholder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	der
Dated 4/04/2014	
Signature U. Co	
(By a director, president or other officer - if directors or officers have no	
selected, by an incorporator – if in the hands of a receiver, trustee, or oth appointed fiduciary by that fiduciary)	er court
Vincent Amato	
(Typed or printed name of person signing)	
President	
(Title of person signing)	

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SECRETARITY STATE
TALL AHASSEE, FLORIDA