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SECRETARY OF STATE



COVER LETTER

Division of Corporations
NAME OF CORPORATION: Strempek Land Management In
DOCUMENT NUMBER: <u>P0900065927</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Chris Strempek Name of Contact Person
Strempek Land Management Inc
5990 Green Pond Rd Address
Blk City Fl 33868 City/ State and Zip Code
Stremehlandmanagement 9 Hughes . net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Chris Strempek at (863) 430-5135 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:
\$35 Filing Fee \$\ Certificate of Status \$\ Certified Copy \ (Additional copy is enclosed) \$\ Certified Copy \ (Additional Copy is enclosed)
No. 111 A J.J Chunch A.d. woon

Mailing Address

TO: Amendment Section

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 to Articles of Incorporation

Strempek 100 (Name of Corporation as curred)	of MONO ently filed with the Florit	Dement INC. In Dept. of State)			
(Document Num	nber of Corporation (if kno	own)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:					
A. If amending name, enter the new name of	f the corporation:				
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "programme must contain the word	designation "Corp," "Infessional association," or olicable: TADDRESS) CE BOX	c," or "Co". A professional corporation the abbreviation "P.A."			
new registered agent and/or the new registered Agent:					
tune of their tagines of agent.					
New Registered Office Address: (Florida street address)		address)			
	(City)	, Florida (Zip Code)			
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a		and accept the obligations of the position.			
<u> </u>	Signature of New Registere	nd Agent, if changing			

Page 1 of 3



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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
esident	Christopher Vincent Strempek	5990 Green Pond Kd Polk City F-1 33868	Add Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
	ditional sheets, if necessary). (Be spec		
provision	endment provides for an exchange, rens for implementing the amendment in applicable, indicate N/A)	classification, or cancellation of iss f not contained in the amendment in	ued shares, tself:
	40-2-1		

The date of each amendment(s) adoption: 10/13/2007	
Effective data if applicables	(date of adoption is required)	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated_/_	116/2009 Nex Among	
selec	a director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
•	Christopher Vincent Strempek (Typed or printed name of person signing)	
	President (Fitte of person signing)	