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(Re	equestor's Name)	
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PICK-UP	MAIT	MAIL
	ısiness Entity Naı	me)
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DIVISION OF CORPORATIONS
2017 APR 21 PM 1: 32

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COVER LETTER

TO: Amendment Section Division of Corpo			* • <u>•</u> .		
NAME OF CORPOR	RATION: Big 1	1 Sales ?	Selvices Inc		
DOCUMENT NUME	BER: <u>PO9000</u>	0096224			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.			
Please return all corres	pondence concerning this ma	atter to the following:			
	Arlind	Lika			
		Name of Contact Person	n		
	2251 Ca	Firm/Company VOLTY BLV2 Address	el .		
Jax, FL 32246					
City/ State and Zip Code					
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
Arlina	Lika	at 904	236-9787		
Name o	f Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
\$35 Filing Fec	☐\$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)		
. Mailing Address Amendment Section		Street Address			
	ion of Corporations	Amendment Section Division of Corporations			
P.O.	Box 6327	Clifton Building			
Talla	hassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

to

D: 11 C).		2017 /	IPR 21 PM 1: 32
519 K Sales	<u>5010100</u>	S INC	Photo)
(Name of Corpo	oration as currently filed wi	in the Florida Dept. of S	<u>state</u>)
<u> </u>	2046 77A	* (10)	
(De	ocument Number of Corporat	ion (if known)	
Pursuant to the provisions of section 607.1006, Flaits Articles of Incorporation:	orida Statutes, this <i>Florida P</i> .	rofit Corporation adopts	the following amendment(s
A. If amending name, enter the new name of the	<u>ie corporation:</u>		
			The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	Corp," "Inc," or "Co". A p		
B. Enter new principal office address, if applic		····	
Principal office address <u>MUST BE A STREET</u>	<u>4DDRESS</u>)		
	_		
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX</u>)		
		· · · · · · · · · · · · · · · · · · ·	
 If amending the registered agent and/or registered agent and/or the new registered. 		rida, enter the name of	<u>the</u>
Name of New Registered Agent			
	(Florida street address)	
New Registered Office Address:	//Tik)	, Flor	
	(City)		(Zip Code)
New Registered Agent's Signature, if changing	Registered Agent:		
hereby accept the appointment as registered age		ecept the obligations of th	ie position.
		•	
	Signature of New Registered .	Agent if changing	
L.	remaining of them were mediatelen	Abom, y 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>	Address
1)Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
4) Change			
Add			
Remove			
5)Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amending or a</u> (Attach <i>additional</i>							
•	•	•	•			4	. 120
Adding	one	more	bath	<u>on</u>	of th	e bu	111/855
1256 Jack	Cossa	tt A	venue		·····		
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. If an amendment	provides for an	ı exchange, rec	lassification, or ca	ancellation	of issued sha	res,	
	<mark>nplementing the</mark> cable, indicate N		not contained in	the amend	ment itself:		
(у пог иррпп	abie, maicuie 14	<i>(A)</i>					
		. _					

The date of each amendment(s), adoption:	, if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date vidocument's effective date on the Department of State's records.	
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	
☐ 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.	
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 or printed name of person signing)	
Treasurer	
(Title of person cigning)	