## P1000005639

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ві	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	·	

Office Use Only



900270196049

amera

03/04/15--01013--010 \*\*35.00



80R 3/5/15

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

	CARROLL ER: P10000005639		CORPORATED		
	f Amendment and fee are sub				
Please return all corresp	ondence concerning this mat	ter to the following:			
;	STEPHEN BARN	ETT			
-		Name of Contact Person			
	CARROLL BRADFORD INC				
_		Firm/ Company			
_	163 E MORSE BL	_VD #210			
		Address			
,	WINTER PARK, F	FL 32789			
<del>-</del>	·	City/ State and Zip Code			
SBA	RNETT@BARNI	ETTACCOUNTI	NG COM		
	_	ed for future annual report			
		•			
For further information	For further information concerning this matter, please call:				
STEPHEN BARNETT 679-5000					
Name of	f Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	Enclosed is a check for the following amount made payable to the Florida Department 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)		
Amer Divis P.O.	ing Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301		

## Articles of Amendment to Articles of Incorporation of

PILED 2015 HAR -4 PM 3: 55 2015 HAR -4 PM 3: 55

## CARROLL BRADFORD INCORPORATED

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

P10000005639

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

ne must be distinguishable and contain the orp.," "Inc.," or Co.," or the designation "ed "chartered," "professional association," o	Corp," "Inc," or "Co". A	pany," or "incorp professional corpor	Th orated" or the abbre ation name must cont
Enter new principal office address, if appli			
incipal office address <u>MUST BE A STREET</u>			
Patricipal Programme 18 and 18		<del></del>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u>E BOX</u> )		<u> </u>
If amending the registered agent and/or re	gistered office address in Fl	orida, enter the na	me of the
If amending the registered agent and/or re new registered agent and/or the new regist		orida, enter the na	me of the
		orida, enter the na	me of the
new registered agent and/or the new regist	ered office address:		me of the
new registered agent and/or the new regist			me of the
new registered agent and/or the new regist	ered office address:  (Florida street addres		- -
new registered agent and/or the new regist  Name of New Registered Agent	ered office address:	s)	-
new registered agent and/or the new regist  Name of New Registered Agent	ered office address:  (Florida street addres  (City)	s)	- -

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	Р	JONATHON MENKE	1200 LIVE OAK STREET
Add			NEW SMYRNA BEACH, F
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		<del></del>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

uacii aaaiiionai she	ets, if necessary).	(Be specific)			
				,	
<del></del>					
					·
an amendment pro					
rovisions for imple	ementing the ame	endment if not o	contained in the	amendment itsel	<u>f:</u>
(if not applicabl	le, indicate N/A)				
				111111111111111111111111111111111111111	

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable: 0	3/02/2015	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were aby the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	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 ca	ast for the amendment(s) was/were sufficient for approval	
by	,,,	
·	(voting group)	
The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated 03/02	/2015	
Signature		
selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	STEPHEN BARNETT	
	(Typed or printed name of person signing)	<del></del>
	VICE PRESIDENT	
	(Title of person signing)	<del></del>