P1000011084

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SECRETARY OF STATE

C GOLDEN
JUN 2 6 2018

COVER LETTER

TO:	Amendment Section		
	Division of Corporations		

NAME OF CORPORATION: Dana Rudolph and Company, INC.
DOCUMENT NUMBER: _P10000011684
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DANA RUDOLP H Name of Contact Person
Name of Contact Person Dana Rudolph + Company The Firm/ Company 3671 5. 17ccess 12d. Address ENGLEWOOD FL 34224 City/ State and Zip Code Mybeadas 1ery D gmail: 4m E-mail address: (to be used for future annual report indiffication)
For further information concerning this matter, please call:
Name of Contact Person at (941) 460 - 8860 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 S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) Certified Copy (Certified Copy is enclosed) Certified Cop
Mailing Address Amendment Section Digition of Corporations Digition of Corporations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILE	· ^
JIM	
SECRETARY OF ST	3: 00
HASSEE ST	A7~

ANA RUDOLOH 1-1NO COMPONY INC.
(Name of Corporation as currently filed with the Plorida Dept. of State)

mt(s) to

	P100000	11684	
(Docu		Corporation (if known)	•
Pursuant to the provisions of section 607,1006, Floric its Articles of Incorporation:	In Statutes, this Fi	lorida Profit Corporation	adopts the following amendme
A. If amending name, enter the new name of the c	corporation:		

name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	ho, " " Inc , " or " C	o". A professional corpo	The new porated" or the abbreviation ration name must contain the
B. Enter new principal office address, if applicable	le:		
(Principal office address MUST BE A STREET AD			
		<u> </u>	,
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>OX</u>)		
		······································	
			
D. If amending the registered agent and/or registe	ered office addre	ss in Florida, enter the na	ame of the
new registered agent and/or the new registered	i office address:		
Name of New Registered Agent			
	(Florida stree	Luddress)	
V D : 100 A11			P1 11
New Registered Office Address:	re		, Florida(Zip Code)
		•	·
New Registered Agent's Signature, if changing Re			
I hereby accept the appointment as registered agent.	I am familiar wi	th and accept the obligation	ms of the position.
Sign	nature of New Rec	ristered 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.

X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address Poplar
1) Change	₩ \	Elizabeth A. KELLER	516 Poplar St.
<u></u> ∧dd			Lebanon PA
Remove			<u> </u>
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if necessary).	(Be specific)		
· <u> </u>			
 			
	- -		
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an amendment provides for an exch	ange, reclassification, or g	cancellation of issued:	shares,
orovisions for implementing the ame (if not applicable, indicate N/A)	idment if not contained in	the amendment itself	2
(y nor apparation)			
		 .	
			
	·		

The date of each amendment(s) adoption:date this document was signed.	June 20, 2018	, if other than the
Effective date if applicable:	(no apre than 90 days after amendment file date)	
	(no inbre than 90 days after amendment file date)	
Note: If the date inserted in this block does no document's effective date on the Department of	ot meet the applicable statutory filing requirements, the State's records.	is date will not be listed as the
Adoption of Amendment(s) (CH	ECK ONE	
The amendment(s) was/were adopted by the shareholders was/were sufficient for a	shareholders. The number of votes east for the amendn approval.	neni(s)
	e shareholders through voting groups. The following stage group entitled to vote separately on the amendment(s).	
"The number of votes cast for the amen	idment(s) was/were sufficient (or approval	
hy	ing group)	
(vot	ing group)	
☐ The amendment(s) was/were adopted by the laction was not required.	board of directors without shareholder action and share	holder
The amendment(s) was/were adopted by the i action was not required.	incorporators without shareholder action and sharehold	er
Dated June 20	0. 2018	
Dated <u>June 2e</u> Signature <u>Dana</u>	0 1 1	
Signature	- rudiff	
	ident or other office - if directors or officers have not h	
appointed fiduciary	orporator – if in the hands of a receiver, trustee, or other by that fiduciary)	COUR
2	Auch Ollowick	
<i></i>	ANA RUNOLPK Typed or printed name of person signing)	
	President	
	(Title of person signing)	