P10000012945

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy 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

(Additional Copy is enclosed)

Articles of Amendment

to
Articles of Incorporation of

P1000001	2945
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	To" A professional corporation name must contain the P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	1200 Fosters Mill Lane Boynton Beach, FL 33436
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1200 Fosters Mill Lane Boynton Beach, Fl. 33436
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	
Name of New Registered Agent	9: 31
New Registered Office Address: (Florida stre	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	
ki	↑
Cinadawa af Man D	K
Signature of New Ke	egistered 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 D	<u>oe</u>		
X Remove	<u>V</u>	Mike Ju	ones		
X Add	<u>sv</u>	Sally Si	<u>mith</u>		
Type of Action (Check One)	Title		Name O		<u>Addres</u> s
1) Change	VP	_	Carlos Gu	azzolli	7634 Oak GROOVE GRC Lake WORTH, FL 3346
Add					Lake WORTH, FL 3346'
X Remove					
2) Change		_			
Add					100-100-100-100-100-100-100-100-100-100
Remove					
3) Change		_		- · · · - · · - · · - · · · · ·	
Add					
Remove					· · · · · · · · · · · · · · · · · · ·
4) Change		_		<u> </u>	
Add					
Remove					
5) Change		-			
Add					
Remove					
6) Change	<u></u>	_			
Add					
Remove					

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)		
	NIA		
		, <u>, , , , , , , , , , , , , , , , , , </u>	
 			
f an amendment provides for an excl	nange, reclassification, or can	cellation of issued shares,	
provisions for implementing the amount (if not applicable, indicate N/A)		<u>e amendment itself:</u>	
	N/A	•	
	——————————————————————————————————————		
	,		

The date of each amendment(s) adoption: APRIL 27, 2017, if other than the date this document was signed.
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 will not be listed as the document'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 of other officer – i) 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)
President (Title of person signing)