## 25 PERCOONS

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And

SEP. 23 2014

R. WHITE

## **COVER LETTER**

TO: Amendment Section

Division of Cor	porations					
NAME OF CORPO	DRATION: 800 Com	merce, Inc.				
DOCUMENT NUM	P10000134	426				
The enclosed Article	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	Barry Hollande	er				
	000 0	Name of Contact Person	n			
	800 Commerce, Inc.					
	040.01 (* 6	Firm/ Company	000			
	319 Clematis S	<del></del>	008			
	West Palm Re	Address	1			
	West Palm Bea	City/ State and Zip Cod				
			e e			
<u>br</u>	ollander1@gma					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	on concerning this matter, pleas	se call:				
Barry Hollander		<sub>at (</sub> 561	249-6511			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check f	for the following amount made	payable to the Florida Depa	artment 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)			
Mailing Address		Street Address				
	nendment Section	Amend	lment Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building				
=	J. DOX 0327	2661 Executive Center Circle				

Tallahassee, FL 32301

## **Articles of Amendment** Articles of Incorporation

FILED

800 Commerce, Inc.

14 SEP 16 PH 3: 17

SMORETARY OF STATE. TABBAHASEER TROADA (Name of Corporation as currently filed with the Florida Dept. of State) P10000013426 (Document Number of Corporation (if known)

ent(s) to

A. <u>If amending name, enter the new name of the corpo</u> N/A	<del></del>		The n
name must he distinguishable and contain the word "c "Corp.," "Inc.," or Co.," or the designation "Corp," " word "chartered," "professional association," or the abb	'Inc," or "Co". A professi		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u>	<u>N/A</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		enter the name	of the
Name of New Registered Agent  N/A	ce aduress.		
	(Florida street address)		
New Registered Office Address:	(Citv)	, Florida	(Zip Code)
ner neganerea Office nativesa.	• • • •		/

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 Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jos	n <u>es</u>		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change	D		Scott Climes		
Add Remove					
2) Change	CEO	<u> </u>	Scott Climes		
Remove 3) Change	s		Barry Hollander		319 Clematis St., #1008
Add Remove					West Palm Bch, FL 33401
4) Change	T		Barry Hollander		319 Clematis St., #1008
Add Remove					West Palm Bch, FL 33401
5) Change		_			
Remove					
6) Change			<del></del>	· · · · · · · · · · · · · · · · · · ·	
Add Remove					

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)				
N/A	on additional sneets, if necessary). (Be specific)			
IN/A	<del></del>			
	<del></del>			
F. If a	n amendment provides for an exchange, reclassification, or cancellation of issued shares,			
pre	ovisions for implementing the amendment if not contained in the amendment itself:			
	(if not applicable, indicate N/A)			
N/A				

The date of each amendment	, if other than the	
date this document was signed		
Effective date if applicable:	September 4, 2014	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	,	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated_Sep	tember 4, 2014	
Signature _		
	By a director, president or other officer – if directors or officers have not been	
	elected. By an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	Barry Hollander	
	(Typed or printed name of person signing)	_
	Secretary	
	(Title of person signing)	