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2017 JUN 30 AM II: 04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. GOLDEN

JUL - 8 2017

COVER LETTER

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION: 5 FGC	ken, P.A.	
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are su	ibmitted for filing.	
Please return all correspondence concerning this ma	itter to the following:	
	Name of Contact Person CLAN A. Firm/ Company Address City/ State and Zip Code Sed for future annual report	24.
For further information concerning this matter, please U. II:a. Scalar Name of Contact Person	se call:	
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State;
\$35 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

FILED

Articles of Amendment to Articles of Incorporation

2017 JUN 30 AM 11: 04

SECRETARY OF STATE TALLAHASSEE, FLORIDA (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: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered." "professional association." or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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	<u>PT</u>	<u>John Do</u>	<u>c</u>		
X Remove	<u>v</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name	Address	
1) Change		_			
Add					
Remove					
2) Change					
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change		_			
Add	•				
Remove					
5) Change		_			
Add					
Remove					
(Change)					
6) Change		-			
Add					
Remove					

. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
	<u> </u>
	— MMI — 1 — 1 — 1 — 1 — 1 — 1 — 1 — 1 — 1 —
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
	·
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adop date this document was signed.	tion:	if other than th
Ç		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	k does not meet the applicable statutory filing requirements, tment of State's records.	this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were suffic	d by the shareholders. The number of votes cast for the amendient for approval.	lment(s)
	ed by the shareholders through voting groups. The following sh voting group entitled to vote separately on the amendments.	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	d by the board of directors without shareholder action and shareholder	reholder
☐ The amendment(s) was/were adopted action was not required.	d by the incorporators without shareholder action and sharehol	der
Dated 4-2 Signature (By a direct	7-17 tor, president or other officer - if directors or officers have no	1 been
selected, by	y an incorporator — if in the hands of a receiver, trustee, or oth fiduciary by that fiduciary)	
	William B. Brzchen, Jr. (Typed or printed name of person signing)	
		<u> </u>
	Pasident	

(Title of person signing)