P10000074621

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COVER LETTER

TO: Amendment Sec Division of Corp	4 5		
NAME OF CORPO	RATION: AMP'D UP,	INC.	
DOCUMENT NUM	BER: P1000007462	1	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this mat	tter to the following:	
	Julia Schultz		
		Name of Contact Persor	1
	474 NE 254 Dise	Firm/ Company	
	471 NE 3rd Place	·	
	Cape Coral FL 33	Address	
	Oape Oolai Loe	City/ State and Zip Code	2
11.1			
JH	Kozar@comcast.r	ICI ed for future annual report	notification)
	E-man address. (to be us	cu for future annual report	nouncation)
For further information	on concerning this matter, pleas	se call:	
Jeffery Koza	r	at (239	, 895-8782
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made p	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)
	iling Address		Address
	endment Section	Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
Tallahassee, FL 32314			xecutive Center Circle

Tallahassee, FL 32301

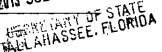
Articles of Amendment to Articles of Incorporation

FILED 2013 JUL 10 PM 4: 02

AMP'D UP, INC

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

P10000074621



ent(s) to

(Document Number	er of Corporation (if	known)	93	· ·
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this F	lorida Profit Cor	poration adopts the	following amendme
A. If amending name, enter the new name of the	ne corporation:			
				The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	Corp," "Inc," or "C	o". A profession		
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET.)				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	(BOX)			
D. If amending the registered agent and/or reg new registered agent and/or the new register		ss in Florida, en	ter the name of the	
Name of New Registered Agent			.	
	(Florida stree	et address)		
New Registered Office Address:			, Florida	
	(City)			Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age		ith and accept the	obligations of the p	position.
Signatura	of May Pagistared A	raut if abanaina		

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>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	Jeffery Kozar	17570 N Tamiami Trail
X Add			Nth Ft Myers
Remove			FL 33903
2) Change	Р	Julia Schultz	471 NE 3rd Place
Add	 		Cape Coral
X Remove			FL 33909
3) Change			
Add			
Remove			
4) Change			
Add	,		
Remove			
5) Change			
Add			
Remove			
0 0			
6) Change			
Add			
Remove			

	ling or adding additional Articles, enter change(s) here: dditional sheets, if necessary). (Be specific)
	
	
<u>If an am</u>	endment provides for an exchange, reclassification, or cancellation of issued shares,
provisio (if i	ons for implementing the amendment if not contained in the amendment itself: not applicable, indicate N/A)
(3)	······································

The date of each amendment(s) a	doption: 07/08/2013
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement 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	(voting group)
	opted by the board of directors without shareholder action and shareholder
■ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
_{Dated} 07/08/	2013
selecte	Afrector, president or other officer – If directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	· · · · · · · · · · · · · · · · · · ·
	PRESIDEN.
	(Title of person signing)