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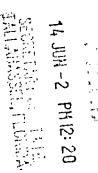
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JUN 1 3 2014 C. CARROTHERS

## **COVER LETTER**

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: KOTEN	Bennett, PA
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.
Please return all correspondence concerning this matter	er to the following:
St. John	Name of Contact Person  Charles PA  Firm/ Company  FERS Green Way, M  Address  MS, FL 32359  City/ State and Zip Code  Als @ amail. Com  d for future ammal report notification)
For further information concerning this matter, please	call:
Name of Contact Person  Enclosed is a check for the following amount made pa	at (904) 701-8551  Area Code & Daytime Telephone Number
\$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (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

## Articles of Amendment to Articles of Incorporation of



14 JUN -2 PH 12: 20

	14 304 Z 111/2. 20
(Name of Corporation as currently filed with the Florida Dept. of State)	SPCREEN 156
Karen Bennett, PA	JALLAHASSEE, FLORIDA
(Document Number of Corporation (if known)	*
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> is Articles of Incorporation:	n adopts the following amendment(s) t
. If amending name, enter the new name of the corporation:	
Karen Crede PA	The new
Crede, PA  Tame must be distinguishable and contain the word "corporation," "company," or "inco "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corp word "chartered," "professional association," or the abbreviation "P.A."	orporated" or the abbreviation poration name must contain the
3. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS  St. Johns,	5 Green Way N FL 32259
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  5Ame	
If amending the registered agent and/or registered office address in Florida, enter the new registered agent and/or the new registered office address:	name of the
Name of New Registered Agent Korth Bekemeyer Crede 881 Putters Green Way N (Florida street address)	<del></del>
New Registered Office Address: 5+. Jphn5 (City), Flor	
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligat  Aum Bekeneyer Ulle Signature of New Registered Agent, if changing	tions of the position.

## 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> <u>Joh</u>	nn Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>V</u>	Herbert S. Bennett,	JR
Add Remove			PALATKA, FL 32177
2) Change	P	Karen B. Crede	981 Putters Green Way X 5+ Johns FL 32259
Remove 3) Change			
Add Remove			
4) Change			
Add Remove			
5) Change			
Add Remove			
6) Change			
Remove			

, , , , , , , , , , , , , , , , , , , ,	
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
rovisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(g was approvable, manage with	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ient(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following stamust 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"  (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and share action was not required.	holder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	21
Dated_ 5/30/14	
Signature Lanen B. Rede	
(By a director, president or other officer – if directors or officers have not l	peen
selected, by an incorporator - if in the hands of a receiver, trustee, or other	court
appointed fiduciary by that fiduciary)	
Karen B. Crede (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	

14 JUN -2 PH I2: 20 SECRETARISME, PLONDA MALLANASSEE, PLONDA