P1/000005668

| (Re | equestor's Name) | | | |
|---|--------------------|-----------|--|--|
| (Address) | | | | |
| (Ac | dress) | | | |
| (Cir | ty/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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JUL 2 9 2014 C. CARROTHERS

FILED

Articles of Amendment

to Articles of Incorporation 2015 JUL 28. PM 3: 19

| | SEPALIARY OF STATE |
|---|---|
| | X DRESS (A. MAGSEELFI BRIDA |
| (Name of Corporation as currently filed with the Fl | orida Dept. of State) |
| P 11000 00 | 5668 |
| (Document Number of Corporation (if | known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</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: | |
| NIA | The new |
| 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 | n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the |
| B. Enter new principal office address, if applicable: | 15540 894 Place |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | Loxa hat ChEE |
| | FL 33470 |
| 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: new registered agent and/or the new registered office address: | <u> </u> |
| Name of New Registered Agent RObert Of | 21/5 |
| 15540 894 (Floridu stre | h Place, Loxabet Chee TL |
| New Registered Office Address: (City) | , Florida (Zip Code) |
| | · |

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. Lam familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

| 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(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" (voting group) | |
| (voting group) | |
| 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. | |
| Dated MARA 4, 2015 Signature X Lund. V. | |
| Signature X X V | |
| (By a director, president or other officer – if 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) | |
| | |
| Robert ORVIS | |
| (Typed or printed name of person signing) | _ |
| (Typed or printed name of person signing) Vice Pees (Title of person signing) | |
| (Title of person signing) | <u> </u> |

| | If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) | | | | | |
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| | If an amendment provides for an exchange, reclassification, or cancellation of issued shares, | | | | | |
| provisions for implementing the amendment if not contained in the amendment itself: | | | | | | |
| | (if not applicable, indicate N/A) | | | | | |
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| '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> | n Doe | |
|-------------------------------|-----------------------|-----------------|---------------------------|
| X Remove | <u>V</u> <u>Mik</u> | <u>ce Jones</u> | · |
| X Add | <u>SV</u> <u>Sall</u> | y <u>Smith</u> | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | P | JUNE LE BOW | 15540 894 Place |
| Add Remove | | | Loxabert char FL 33470 |
| 2) Change | P | Robert Druis | 15540 894 Play |
| Add Remove | | | Lotahulda FL 33470 |
| 3) Change | . | | |
| Add | | | |
| 4) Change | | | |
| Add Remove | | | |
| 5) Change | | | |
| Add Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |