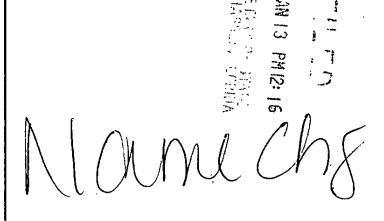
(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:]





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JAN 17 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPOR	RATION: EMERAL	O COAST CRED	IT CARD : K9 Tuc	
DOCUMENT NUME		0006910		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	Scott	M; LLEK Name of Contact Person	2	
	$C\Omega$.	Name of Contact Person	ח	
CPAY NWF, Inc				
Name of Contact Person CPAY NWF, In a Firm/ Company				
	918 C	ALINDE TIVE		
		Address		
	J-EST	N, FL	5254/	
		City/ State and Zip Cod	e	
For further information	E-mail address: (to be us		notification)	
Name	T Contact Person	at (550	de & Daytime Telephone Number	
	•		,	
Enclosed is a check fo	r 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)	
Moi	ling Address	Street	Address	

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

	Articles of Inc	erporation	
_	of		
EMERALD COAST CRED	T CAM +	K9 Tuc.	
(Name of Corr	poration as currenti	y filed with the Florida Dept.	of State)
PIII	00000691	ก	
		f Corporation (if known)	
ursuant to the provisions of section 607.1006, l s Articles of Incorporation:	Florida Statutes, this	Florida Profit Corporation ad	opts the following amendment(s)
. If amending name, enter the new name of	the corporation:		
CPAY NWF	Tar.		The new
name must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "word" chartered," "professional association,"	e word "corporatio 'Corp," "Inc," or "	Co". A professional corpora	rated" or the abbreviation
3. Enter new principal office address, if appl	icable:	NA	
Principal office address MUST BE A STREE			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC		NA	
D. If amending the registered agent and/or r new registered agent and/or the new regis			e of the
	(Florida sti	reet address)	
N. Budan J. Office A. H. Co.	·	•	. Florida
New Registered Office Address:		(City)	(Zip Code)
New Registered Agent's Signature, if changir I hereby accept the appointment as registered a			s 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.

Example: X Change	<u>PT</u>	John Doe	1116	 	
X Remove	<u>v</u>	Mike Jones	NIF	1	
_X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) Change					~
Add					<u></u>
Remove					
2) Change					
Add					
Remove					
3) Change					<u> </u>
Add					
Remove				- adv	<u></u>
4) Change				···········	
Add					
Remove					
5) Change	1.				
Add					
Remove					
6) Change		<u> </u>			
Add				····	
Remove					
			Page 2 of 4		

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f an amendment provides for an exch	ange, reclassificat	tion, or cancellation of issued shares.
provisions for implementing the ame	ange, reclassificat ndment if not con	tion, or cancellation of issued shares, tained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not con	tained in the amendment itself:
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The date of each amendment(s) adoption date this document was signed.	n: JANYAN	y 1,2017	, if other than the
Effective date <u>if applicable</u> :			
	(no more than 90	days after amendment file date)	!
Note: If the date inserted in this block d document's effective date on the Department		ble statutory filing requirement	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopted by the shareholders was/were sufficien	y the shareholders. The it for approval.	number of votes cast for the ame	endment(s)
☐ The amendment(s) was/were approved must be separately provided for each to			
"The number of votes cast for the	• •	sufficient for approval	
by	(voting group)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)		
☐ The amendment(s) was/were adopted be action was not required.	y the board of directors v	without shareholder action and s	hareholder
The amendment(s) was/were adopted by action was not required.	by the incorporators without	out shareholder action and share	holder
Dated John	10,201	<u>2</u> \	
Signature X	ALV IN	if directors or officers have	not been
(By a director selected, by a	r, presiden t or other willed an incorporator – if in the	hands of a receiver, trustee, or o	not been other court
	uciary by that fiduciary)	, , ,	
	Scott 1	Nillex	
	(Typed or printed n	name of person signing)	
	PRUSI	sont	
	(Title o	of person signing)	