## P110000008598

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## **COVER LETTER**

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**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: WHITE LION MOVING SYSTEMS OF	SOUTH FLORIDA
DOCUMENT NUMBER: P1100008598	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	<b>5</b>
JAMES FISCHER  Name of Contact Person	
MOVING SYSTEMS OF SOUTH FLORID	A
3350 NW 2 AVE #A28 Address	
BOCA RATON, FL, 33431 City/ State and Zip Code	
Floridaconsultant Dyahoo.com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Contact Person at (S6) 594 - Oct Area Code & Daytime Telepho	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee U\$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed)  \$252.50 Filing Fee & Certified Copy (Additional Copy is enclosed)	nis
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** Articles of Incorporation



\_2000008598

(Document Number of Corporation (if known)

t(s) to

A. If amending name, enter the new name of the			- ha A		
MOVING SYSTEMS	OF SOUT	+ + -	ORIDA	<u>, (N</u>	C. The new
ame must be distinguishable and contain the v Corp.," "Inc.," or Co.," or the designation "Co vord "chartered," "professional association," or c	orp," "Inc," or "C	o". A professi	or "incorpo onal corpora	rated" or tion name	the abbreviatio must contain th
s. Enter new principal office address, if applica Principal office address <u>MUST BE A STREET A</u>					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)				
D. If amending the registered agent and/or regined new registered agent and/or the new register		ss in Florida, e	nter the nam	e of the	
Name of New Registered Agent					
	(Florida stree	t address)			
New Registered Office Address:				Florida	
	(1	Tity)	,		(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen		th and accept th	ne obligations	of the pos	sition.
and the second supportant and register our age.	I wan jwan na wa	aa uocepi		oj mo po.	
	ignature of New Re				

## 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	
X Remove	<u>V</u>	Mike Jones	
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			
Remove			
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
S) Change			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis and analysis and an analysis analysis and an analysis and an analysis analysis and an analysis
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an in the amendment itself:

The date of each amendment(s) adoption: date this document was signed.	8/1/16	, if other than the
Effective date if applicable:	8/1/16	
<del>,</del> _	(no more than 90 days after amendme	ent file date)
Note: If the date inserted in this block document's effective date on the Department		requirements, this date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient f		t for the amendment(s)
☐ The amendment(s) was/were approved by must be separately provided for each vol	the shareholders through voting groups. It	
"The number of votes cast for the a	mendment(s) was/were sufficient for appro	val
by	(voting group)	
The amendment(s) was/were adopted by action was not required.  The amendment(s) was/were adopted by action was not required.		
selected, by an	resident or other officer – if directors or of neorporator – if in the hands of a receiver, ary by that fiduciary)	
	AMES M. FISCHET (Typed or printed name of person signir	
<del>*</del>	(Title of person signing)	