## P11000019259

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SECRETARY OF STATE OF CORPORATIONS

Amend Marketoill

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: THE IR	PISH SEALER & STRIPER INC
DOCUMENT NUMBER: <i>P  0000</i>	0/9259
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this ma	tter to the following:
JAMES C	RAWFORD  Contact Person
Fin	m/ Company
4612 N.E. 2	Address
OCALA F	L 34479 atc and Zip Code
IRISH FINNY VINYLE E-mail address: (16 be used for fi	
For further information concerning this matter, pleas	e call·
	at ( <u>352</u> ) <u>208-1578</u> Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
\$35 Filing Fee \$\times Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed)  □ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendment Section Division of Corporations P.O. Box 6327	Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment** to Articles of Incorporation of

 THE IRISH SEALER & STRIPER	INC
 (Name of Corporation as currently filed with the Florida Dept. of State)	
P11000019259	
 (Document Number of Corporation (if known)	

wing

A. If amending name, enter the new name of	the corporation:		
			The n
name must be distinguishable and contain that abbreviation "Corp.," "Inc.," or Co.," or the make must contain the word "chartered," "prof	designation "Corp,"	"Inc," or "Co". A profession	orated" or 1 nal corporati
B. Enter new principal office address, if appl (Principal office address <u>MUST BE A STREET</u>			•
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC			DIVISION OF
D. If amending the registered agent and/or renew registered agent and/or the new regis			11.APR 11 AM 10: 05
Name of New Registered Agent:			
New Registered Office Address:	(Florida str	reet address)	
_		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered as	g Registered Agent: gent. I am familiar w	ith and accept the obligations	of the positio
	gnature of New Regis	tered 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>f</u>	FAMES CRAWFORD	4612 NE 2157 CT OCALA FL 34479	Add Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
	ling or adding additional Articles, enter of different sheets, if necessary). (Be specifically sheets)		
provisio	nendment provides for an exchange, reclanders for implementing the amendment if not applicable, indicate N/A)	assification, or cancellation of issect to the second section	ued shares, tself:
<del></del>	· · · · · · · · · · · · · · · · · · ·		

The date of each amendment	(s) adoption: 2-28-1(
Effective date if applicable:	(date of adoption is required)
Effective date it applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statemen d for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	east for the amendment(s) was/were sufficient for approval
by	" (voting group)
	(voting group)
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated	4-8-11
selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court printed fiduciary by that fiduciary)
	FAMES CRAWFORD
	(Typed or printed name of person signing)
	- PRESIDENT
	(Title of person signing)