## 711000039543

| (Requestor's Name)                      |
|---|
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| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORI                               | PORATION:                                  | J David Sanders, Inc.  |
|--|--|--|
| DOCUMENT NU                                | MBER:                                      | P11000039543   |
| The enclosed Artic                         | cles of Amendment and fee                  | are submitted for filing.  |
| Please return all co                       | orrespondence concerning t                 | his matter to the following:   |
|  |  | Jonathan Sanders   |
|  |  | Name of Contact Person   |
|  | J  | David Sanders , Inc.   |
|  |  | Firm/ Company  |
|  |  | 92 Carolyn Lane  |
|  |  | Address  |
|  |  |  |
|  | Sant                                       | a Rosa Beach Fl. 32459   |
|  |  | City/ State and Zip Code   |
| <del></del>                                | waltor<br>E-mail address: (to be u         | ncoast@gmail.com   |
| •  | `  | ,  |
| For further informa                        | ation concerning this matte                | r, please call:  |
|  | arolyn Boswell                             | at ( 850 ) 880-6047  |
| Name                                       | of Contact Person                          | Area Code & Daytime Telephone Number   |
| Enclosed is a check                        | c for the following amount                 | made payable to the Florida Department of State:   |
| <b>☑ \$</b> 35 Filing Fee                  | \$43.75 Filing Fee & 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) |
| Mailing Address                            |  | Street Address   |
| Amendment Section Division of Corporations |  | Amendment Section Division of Corporations   |
| P.O. Box 6327                              |  | Clifton Building   |
| Tallahassee, FL 32314                      |  | 2661 Executive Center Circle   |
|  |  | Tallahassee, FL 32301  |

## Articles of Amendment to Articles of Incorporation of

| J Dav  | /id Sanders, Inc.                  |                            |                     |
|--|------------------------------------|----------------------------|---------------------|
| (Name of Corporation as cu   | rrently filed with the Florida De  | pt. of State)              |                     |
| (Document N  | umber of Corporation (if known)    | <del>'</del>               |                     |
| Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation                                       |                                    | a Profit Corporation ad    | lopts the following |
| A. If amending name, enter the new name  | of the corporation:                |                            |                     |
|  |                                    |                            | The new             |
| name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or t. name must contain the word "chartered," "p | he designation "Corp," "Inc," or   | "Co". A professional       |                     |
| B. Enter new principal office address, if a (Principal office address MUST BE A STRE   |                                    | <u>-</u>                   | _                   |
| C. Enter new mailing address, if applicab<br>(Mailing address MAY BE A POST OF)  |                                    |                            | _                   |
| D. If amending the registered agent and/or   |                                    | rida, enter the name of    | TALL AS             |
| new registered agent and/or the new re   | gistered office address:           |                            | 22<br>Ass.          |
| Name of New Registered Agent:  |                                    | <del></del>                |                     |
| New Registered Office Address:   | (Florida street addre              | ss)                        | 20                  |
|  |                                    | , Florida                  | . A.L.              |
|  | (City)                             | (Zip Code)                 |                     |
| New Registered Agent's Signature, if chang   |                                    |                            |                     |
| I hereby accept the appointment as registered  | l agent. I am familiar with and ac | ecept the obligations of t | he position.        |
| <del></del>  | Signature of New Registered Age    | nt, 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>  | Address  | Type of Action        |
|--------------------------------|--|--|-----------------------|
| President                      | Jonathan David Sanders   | 92 Carolyn Lane<br>Santa Rosa Beach, Fl. 32439                               | ☐ Add ☐ Remove        |
|                                |  |  | ☐ Add<br>☐ Remove     |
|                                |  |  | Add Remove            |
|                                | g or adding additional Articles, enterional sheets, if necessary). (Be spec                          |  |                       |
|                                |  |  |                       |
| <b>provisions</b><br>(if not a | dment provides for an exchange, re<br>for implementing the amendment in<br>applicable, indicate N/A) | classification, or cancellation of iss<br>f not contained in the amendment i | ued shares,<br>tself: |
| N/A                            |  |  |                       |
|                                |  |  |                       |
|                                |  |  |                       |

| The date of each amendmen                        | t(s) adoption: 05/25/2011  |
|--|--|
| Effective date <u>if applicable</u> :            | (date of adoption is required)   |
|  | (no more than 90 days after amendment file date)   |
| Adoption of Amendment(s)                         | (CHECK ONE)  |
|  | ere adopted by the shareholders. The number of votes cast for the amendment(s) vere sufficient for approval.   |
|  | ere approved by the shareholders through voting groups. The following statement ed 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)   |
| The amendment(s) was/we action was not required. | ere adopted by the board of directors without shareholder action and shareholder   |
| The amendment(s) was/we action was not required. | ere adopted by the incorporators without shareholder action and shareholder  |
| Dated_07/2                                       | N. A. D1 CA  |
| sele   | a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary) |
|  | Jonathan David Sanders   |
|  | (Typed or printed name of person signing)  |
|  | President  |
|  | (Title of person signing)  |