## P11000048774

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Amend Name
FEB 12 2016

I ALBRITTON

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Mark	Rawlinson & C	ompany INC
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Name of Contact Person  Mark Rawlinson of Company In C  Firm/ Company  531 Rellane On  Address  Venice FL 34293  City/ State and Zip Code			
E-mail address: (so be used for future annual report notification)			
For further information concerning this matter, please call:			
Name o	Pawlinson Contact Person	at ( QUI Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department 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)
<u>Mail</u>	ing Address	Street	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 Amend	ment	2016 FEB 11 F	
·	to Articles of Incorpo	ration	201-	FA
	of	MM)	COIEFEBIL	-0
Mark	C Rawlings	1 Compro	TALLYEN	412.
7 - 1 -	oration as currently file	d with the Florida D	Dept. of State)	<del></del>
P	1100004877	4	TE.F.	05/E
(De	ocument Number of Corp	poration (if known)		TO A
cursuant to the provisions of section 607,1006, Flas Articles of Incorporation:	orida Statutes, this <i>Flori</i> a	da Profit Corporatio	n adopts the following an	nendment(s)
A. If amending name, enter the new name of the	he corporation:			
	on & Compar	u) Inc	T.I.	
name must be distinguishable and contain the	word "corporation," "	company," or "inco		e new eviation
Corp.," "Inc.," or Co.," or the designation "Co.	Corp," "Inc," or "Co".	A professional corp	poration name must con	ain the
vord "chartered," "professional association," or	the appreviation "P.A."	٠	. D. 1	
B. Enter new principal office address, if applicable:		186 Ven	ice Blvd Fl. 34293	
Principal office address <u>MUST BE A STREET</u>	<u>ADDRESS</u> )	Verice	FL 34093	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u> </u>	186 Venic	e East Blvd	<del>y .=</del>
	_	<u>venice</u>	L 34213	
D. If amending the registered agent and/or reg new registered agent and/or the new register		n Florida, enter the	name of the	
Name of New Registered Agent				
	(Florida street ad	dress)		
V D			701 (1	
New Registered Office Address:	(Citv)		, Florida(Zip Code	<del></del>
Levi Designation of America Community of the series	Designated & cont.			
New Registered Agent's Signature, if changing hereby accept the appointment as registered age		nd accept the obliga	tions of the position.	
and the second s	2 9	zecepe me omigm		
	Signature of New Registe	ered Agent if changi	no	

## 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			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
<del></del>	
· · · · · · · · · · · · · · · · · · ·	
	,
	· · · · · · · · · · · · · · · · · · ·
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
orovisions for implementing the americal (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

The date of each amendment(s) adopted date this document was signed.	on:	, if other than the
· ·	1-1-2016	
Effective date if applicable:	(no more than 90 days after a	mendment file date)
Note: If the date inserted in this block document's effective date on the Department.		filing requirements, 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 sufficie	by the shareholders. The number of vont for approval.	ites cast for the amendment(s)
☐ The amendment(s) was/were approved must be separately provided for each	by the shareholders through voting gr voting group entitled to vote separatel	
"The number of votes cast for th	e amendment(s) was/were sufficient fo	r approval
by	(voting group)	,
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without share	holder action and shareholder
☐ The amendment(s) was/were adopted action was not required.	by the incorporators without sharehold	er action and shareholder
Dated 2-9.1	16	
Signature	<b>30</b> -	
(By a directo	, president or other officer – if directo	rs or officers have not been
selected, by	an incorporator – if in the hands of a re	ceiver, trustee, or other court
appointed fic	luciary by that fiduciary)	
	VAMIE Rau	V :1450m
<del></del>	(Typed or printed name of perso	n signing)
	President	
	(Title of person sign	ing)