P11000060347

(Re	equestor's Name)	
(Ac	ddress)	
γ."	24 ,000,	•
(Ad	ddress)	. "
(Ci	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bi	usiness Entity Nan	ne)
(D	ocument Number)	
	ocument Number)	
Certified Copies	Certified Copies Certificates of Status	
		
Special Instructions to	Filing Officer:	
į		

Office Use Only



100239351081

09/10/12--01028--013 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: THE CUSTOMER RESOURCE INC. DOCUMENT NUMBER: P110000 6034-7 The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
RICHARD P. HARRIS Name of Contact Person THE CUSTOMER RESOURCE INC. 13911 WEST HILLS BOROUGH AVENUE SUI Address City/ State and Zip Code	TE 311
RCHARDETHECUSTOMEKRESOUREE.COM E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call: CHARD HARRIS at (727) 424 2048 Name of Contact Person Area Code & Daytime Telephorie Number	
\$35 Filing Fee	
Mailing 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 Amendment to

Articles of Incorporation of

THE CUSTOMER RESOUR	CF INC
(Name of Corporation as currently filed with the F	oriua Dept. of State)
(Document Number of Corporation (it	Fknown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this aits Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
NA	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "word "chartered," "professional association," or the abbreviation "	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A No.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	FILED PHIZ: 10
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	ess in Florida, enter the name of the
	NADDIC
Name of New Registered Agent RICHARY 5. 301-125HOK	E JRVE EAST
New Registered Office Address: 6LDSMAK (City)	, Florida 344077 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar v Signature of New Registered Agent.	rith and accept the obligations of the position.

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 <math>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	VP	KEETON ROBERT D MR.	ZILO DANFORTH
Add Remove		MK.	SPRING HILL, AL 3460
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			. <u>.</u> .
4) Change		_	
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change		_	
Add			
Remove			

 If amending or adding additional Arti (Attach additional sheets, if necessary). 	(Be specific)
. 1/4	
NA	
•	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
RICHARD P HAR	RIS RECEIVES 40 SHARES
VIALLEY I LITTO	
FROM KOBERT	J. KEETON

The date of each amendment(s) adoption: AUGU5T 31, 2016
Effective date if applicable: SEPTEMBER 21 2012
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated AUGUST 31, GOIG
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
TCHARD P. HARRIS (Typed or printed name of person signing)
TRESIDENT (Title of person signing)