(Requestor's Name)	_
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
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11/17/11--01030--003



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
			Add
			☐ Add
			Remove
	ding or adding additional Articles additional sheets, if necessary). (E		
			
		<u> </u>	
	al and an Ular Constant		tion of insued above
r. <u>It an a</u> provisi	mendment provides for an exchan ions for implementing the amendn	ge, reclassification, or cancellar nent if not contained in the ame	endment itself:
(if)	not applicable, indicate N/A)		
		·	
			·
		<u></u>	

The date of each amendment(s	adoption: ///////
Effective date if applicable:	(date of adoption is required)
	o more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s sufficient for approval.
	approved by the shareholders through voting groups. The following stateme or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	t for the amendment(s) was/were sufficient for approval
by	
(oting group)
The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholde
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated	14/11 L
Signature 8	Man Dullon
	d, by an incorporator – if in the hands of a receiver, trustee, or other court
	ted fiduciary by that fiduciary)
	ANDREW BURTON
	(Typed or printed name of person signing)
	(Title of person signing)