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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: L. P. hugge(1 Inc.) DOCUMENT NUMBER: P11 0000 94799
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 A. P. Auggeri Troc. Firm/ Company
Address Address City/ State and Zip Code City/ State and Zip Code E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
Name of Contact Person at (773) 285.4264. Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee U\$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed) \$35 Filing Fee (Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

•	to	h
	Articles of Incorporation	Table 1
0 0	of	B Bass Error Inch
K. P.	Buggeri Toc.	16 APR 26 PM 1:27
(Name of Corporat	ion as currently filed with the Florida	12
000		SECRETARY OF STATE
	00084799	<u>TA'LLAHASSEE, FLORIE</u>
(Docu	ment Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	la Statutes, this Florida Profit Corporati	ion adopts the following amendment(s)
A. If amending name, enter the new name of the c	orporation:	
	مال	The new
name must be distinguishable and contain the wo	rd "cornoration." "company." or "in	
"Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	o," "Inc," or "Co". A professional co	rporation name must contain the
B. Enter new principal office address, if applicabl	e: NA	
(Principal office address MUST BE A STREET AD		
		
C. F		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	ALA.	
(making data ess MAT BE A TOST OFFICE BE	<u> </u>	

- · · · · · · · · · · · · · · · · · · ·		
D. If amending the registered agent and/or registe		e name of the
new registered agent and/or the new registered	office address:	
Name of New Registered Agent	VIA.	
The state of the s		
	(Florida street address)	
N n :		
New Registered Office Address:	(City)	, Florida (Zip Code)
	(City)	(Zip Coae)
New Registered Agent's Signature, if changing Re	gistered Agent:	
hereby accept the appointment as registered agent.	I am familiar with and accept the oblige	ations of the position.
Sian	nature of New Registered Agent, if chang	nna
Sign	man o of them negatered agent, if chang	*"5

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	PT John Doe	
X Remove	V Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	V duce huggeri	4259 Mallard Creck Track
Add	·	Palm City, FL, 34990.
Remove		
2) Change	PVTS Robert huggeri	1940 SW SUNSET Traci Blm Cuty, PL 34990.
Remove		tan wy, 10 27 119
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
•	
f an amendment provides for an exch	ange, 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)	· · · · · · · · · · · · · · · · · · ·
1	50% sheres ere wherea en
by hogou	10 0 DIENS ET CENCLIFIC EN
1 70-0	1000 C (1-00)
hoseit auggott	TWYLL 100-10 of Shares

The date of each amendment(s) adoption: date this document was signed.	12.4-15		, if other than the
J	12115	_	
Effective date <u>if applicable</u> :	(no more than 90 days	after amendment file date)	
Note: If the date inserted in this block does n document's effective date on the Department of	ot meet the applicable st		will not be listed as the
Adoption of Amendment(s) (CH	ECK ONE)		
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The numbapproval.	er of votes cast for the amendment(s)	
☐ The amendment(s) was/were approved by the must be separately provided for each voting			t
"The number of votes cast for the amer	ndment(s) was/were suffic	cient for approval	
by	ing group)	"	
(vot	ing group)		
☐ The amendment(s) was/were adopted by the action was not required.	board of directors withou	ut shareholder action and shareholder	
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without sha	areholder action and shareholder	
Dated 12.4-1	5		
	57		
Signature Court	1-100		
		directors or officers have not been	
selected, by an inco		s of a receiver, trustee, or other court	
appointed fiduciary	A .		
	hobert f.	huggeri	
(Typed or printed name o	of person signing)	
	Preside	nt	
	(Title of person	on signing)	