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☐ PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
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Certified Copies	Certificates	of Status
Constitution to	Filing Officer	
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C. CARROTHERS

COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: Morris & HANCOCK, P.A. DOCUMENT NUMBER: P11000 106603	
DOCUMENT NUMBER: P11000 106603	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Christoph of Hancock Name of Contact Person Morris & Hancock, of A Firm/ Company 2014 & Robin son Shrut Address Orlando R 32863 City/ State and Zip Code accounting @ Morris hancock, com E-mail address: (to be used for future annual report notification)	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call: DAVID KALINA 21 (407) 894-055	- 2
Name of Contact Person Name of Contact Person Area Code & Daytime Telephone	Number
	Number
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate Copy (Additional copy is enclosed) Certificate Of Status Certificate Of Status Certificate Of Status Certified Copy (Additional Copy is enclosed)	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Morris & Hancack, P. A.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P11000106603	
(Document Number of Corporation (if known)	•
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	amendment(s)
A. If amending name, enter the new name of the corporation:	The Smoon
name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the absence," "Inc.," or Co.," or the designation "Corp.," "Inc." or "Co". A professional corporation name must coword "chartered," "professional association," or the abbreviation "P.A."	on tarm the
B. Enter new principal office address, if applicable:	AH IO: O:
(Principal office address MUST BE A STREET ADDRESS)	
	हुल ज
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street uddress)	
New Registered Office Address:	
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
The state of the position.	
Signature of New Registered Agent, 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)

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	•	1 Doe	•
X Remove	<u>V</u> <u>Mik</u>	e Jones	
<u>X</u> Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	_ •	Monris, Michael E	2014 E Robinson 81 Octondo, FZ 32803
Add Remove			Urlando, 12 2000
2) Change		·	
Remove 3) Change			
Add			
4) Change			
Remove			
5) Change			
Remove 6) Change			
Add			
Remove			

amending or adding additional Artinach additional sheets, if necessary).	(Be specific)
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
()	
<u></u>	

The date of each amendment(s) adopt	tion: JANUARY 30, 2015	, if other than the
date this document was signed.		
Effective date if applicable:	JANUARY 30, 2015	_
	(no more than 90 days after amendment file date)	•
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were suffice	d by the shareholders. The number of votes east for the amendment(s) ient for approval.	
The amendment(s) was/were approv	red by the shareholders through voting groups. The following statement ch 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)	
	(voting group)	
The amendment(s) was/were adopte action was not required.	d by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder action and shareholder	
Dated2/2	30/2015	
Signature (D. Air	etor, president or other officer – if directors or officers have not been	<i>,</i>
	by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed	fiduciary by that fiduciary)	
	Christopher P Handock (Typed or printed name of person signing) President / Managing Parties (Title of person signing)	
	(Typed or printed name of person signing)	
_	President/Managing Parties	<u></u>
_	(Title of person signing)	