## P1200013257

(Requestor's Name)
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## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: JOE WARD ENTERPRISES, INC. DOCUMENT NUMBER: P12000012257 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MICHAEL K FISH Name of Contact Person MICHAEL K FISH CPA PA Firm/ Company 7700 N KENDALL DR SUITE 405 Address MIAMI, FL 33156 City/ State and Zip Code MIKE@MKFISHCPA.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MICHAEL K FISH Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee

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(Additional copy is enclosed)

**Mailing Address** 

TO: Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Certificate of Status

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certificate of Status

Certified Copy

(Additional Copy is enclosed)

## Articles of Amendment to Articles of Incorporation of

JOE WARD ENTERPRISES, INC	
(Name of Corporation as currently filed with the Fig.	rida Dept. of State)
P12000012257	
(Document Number of Corporation (if k	snown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	dorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." or "Coword "chartered," "professional association," or the abbreviation "P.	"company," or "incorporated" or the abbreviation o". A professional corporation name must contain the A."
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
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 new registered agent and/or the new registered office address:  Name of New Registered Agent  DIANNE WARD	ss in Florida, enter the name of the
257 E LUCY ST	Was to have
(Florida stree	
New Registered Office Address: FLORIDA CITY	Florida 33034
New Regisiereu 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 wi  Signature of New Registered Agent.	Jan D

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>	Name .	<u>Addres</u> s
1) Change	D	JOSEPH WARD	257 E LUCY ST
Add			FLORIDA CITY, FL 33034
Remove			
2) Change	D	DIANNE WARD	257 E LUCY ST
✓ Add			FLORIDA CITY, FL 33034
Remove			4-14-17-17-17-17-17-17-17-17-17-17-17-17-17-
3) Change			
Add			
Remove			<del></del>
4) Change			<u>an ann an </u>
Add			
Remove			***************************************
5) Change			
Add			
Remove			<del> </del>
6) Change			
Add	**********		<del></del>
Remove			

L. If amending or adding additional Articles, enter change(s) here:  (Auach additional sheets, if necessary). (Be specific)					
N/A					
provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:				
N/A					
<del></del>					

The date of each amendment(s) ad	option:	_, if other than the
date this document was signed.		
Effective date if applicable:		_
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) flicient for approval.	
The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement 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 add action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated 12/07/20	016	
Signature (By a d	irector, president or other officer – if directors or officers have not been	
	I, by an incorporator – if in the hands of a receiver, trustee, or other court	
арроіп	ed fiduciary by that fiduciary)	
	JOSEPH G WARD	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	