P12000014201

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SECRETARY OF STATES DIVISION OF CORPORATIONS

Amend 105/21/12

COVER LETTER

TO: Amendment Section Division of Corporations		·		
NAME OF CORPORATION: JC'S BUYSEL	LTRADE CARDS & (COLLECTABLES INC.		
DOCUMENT NUMBER: P1200001420				
The enclosed Articles of Amendment and fee are si				
Please return all correspondence concerning this ma	atter to the following:			
WALTER H. ME	SSICK			
	Name of Contact Person	<u> </u>		
GALVAN MESSICK, LLP				
	Firm/ Company			
1900 CORPORATE BLVD., SUITE 101 WEST				
BOCA BATON I	Address			
BOCA RATON, F				
	City/ State and Zip Code	e		
MESSICKW@BELL				
E-mail address: (to be u	sed for future annual report	notification)		
For further information concerning this matter, plea	se call:			
WALTER H. MESSICK	_{at (} 561	, 995-8868		
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:		
\$35 Filing Fee \$Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301		

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as current	tly filed with the Florida	Dept. of State)		•
P12000014201				
(Document Number	er of Corporation (if known	1)	·	
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this <i>Florida</i>	Profit Corporation ad	opts the following	g amendment(s) to
A. If amending name, enter the new name of th	ne corporation:			
				_The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	Corp," "Inc," or "Co". A	ompany," or "incorpoi 1 professional corporal	rated" or the ab tion name must c	breviation contain the
B. Enter new principal office address, if application (Principal office address MUST BE A STREET A				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE				DIVISION OF CORPORATIONS 12 HAY 17 PM 12: 58
D. If amending the registered agent and/or reginew registered agent and/or the new register Name of New Registered Agent	istered office address in F red office address:	Florida, enter the name	e of the	PHIZ: 58
Nume of New Neglistreat Agent				
· · · · · · · · · · · · · · · · · · ·	(Florida street addre	ess)		
New Registered Office Address:	(City)	, Florida_	(Zip Code)	
New Registered Agent's Signature, if changing l I hereby accept the appointment as registered ager	Registered Agent: nt. I am familiar with and	accept the obligations	of the position.	
Signature o	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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) <u>X</u> Change Add Remove	DP	CHRISTOPHER HEINE	822 SOUTH A ST. LAKE WORTH, FL 33460
2) Change 	DVTS	JOHN DEVINE	9 FAITH DR OCEAN, NO 07712
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove		<u> </u>	
6) Change Add Remove		· · · · · · · · · · · · · · · · · · ·	

. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
OT APPLICABLE				
				
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If an amendment provides for an exch	anga waalassifiaa	tion or concellatio	n of iccuad charac	3
provisions for implementing the amer	ndment if not con	tained in the amen	idment itself:	
(if not applicable, indicate N/A)				
				
OT APPLICABLE				
				<u> </u>
				······································
•				

Effective date <u>if applicable</u> :	
•	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved 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)
	(voting group)
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder
Dated	
Signature	his Phan
	rector, 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 ed fiduciary by that fiduciary)
ирропп	· · · · · · · · · · · · · · · · · · ·
	CHRISTOPHER HEINE
-	CHRISTOPHER HEINE (Typed or printed name of person signing)
-	