# P12000020255

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
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### **COVER LETTER**

<b>TO:</b> Amendment Section Division of Corpora	<del>-</del>		₩r
	TION: JR MOU		· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBE	<sub>R:</sub> P12000020	255	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
N	IN BAE		
		Name of Contact Person	1
7	IN BAE CPA	INC	
		Firm/ Company	
1	0151 DEERWOO	D PARK BLVD B	LDG 200 SUITE 250
		Address	
	IACKSONVIL	LE, FL 32256	
		City/ State and Zip Cod	2
MIN	BAE@COMC	CASTINET	
		sed for future annual report	notification)
For further information of	concerning this matter, pleas	se call:	
MIN BAE		at (904	864-2588
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 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)

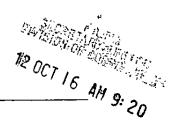
### **Mailing Address**

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

### Street Address

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

## **Articles of Amendment** to **Articles of Incorporation**



# JR MOUNTAIN CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

# P12000020255

ndment(s) to

(Document Number of Corporation (if known)	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts thits Articles of Incorporation:	ne following amend
A. If amending name, enter the new name of the corporation:	
	The no
name must be distinguishable and contain the word "corporation," "company," or "incorporated" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation no word "chartered," "professional association," or the abbreviation "P.A."	
3. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u> )	·
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	<del> </del>
<ol> <li>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:</li> </ol>	<u>ne</u>
new registered agent and/or the new registered office address.	
Name of New Registered Agent	
(Florida street address)	
(1 to had street data essy	
New Registered Office Address: , Florida, Florida,	
(City) (Zi <sub>i</sub>	p Code)
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the	e 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	<u>PT</u> <u>John</u>	n_Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
_X Add	SV Sally	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change X Add Remove	<u>V</u>	JUNGAE PAK	ORANGE PARK FL 32073
2) Change Add	<del></del>		
Remove 3) Change Add			
Remove 4) Change Add Remove			
5) Change Add			
Remove  6) Change  Add  Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	Attach add	ng or adding additional Ar ditional sheets, if necessary).	(Be specific)	_	
provisions for implementing the amendment if not contained in the amendment itself:					
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(if not applicable, indicate N/A)	<u>provisio</u> i	ns for implementing the am	endment if not containe	ed in the amendment itself:	
	(if no	ot applicable, indicate N/A)			
					<del></del> .
			<del></del>		

The date of each amendment(s) a	doption:	10	15	12		
Effective date <u>if applicable</u> :	(n	o more th	an 90 day:	s after amena	lment file date)	
Adoption of Amendment(s)	(CHEC	K ONE)				
☐ The amendment(s) was/were add by the shareholders was/were su			The numb	per of votes o	ast for the amend	ment(s)
☐ The amendment(s) was/were app must be separately provided for						
"The number of votes east	for the amendme	ent(s) was	were suff	icient for app	roval	
by	(voting	group)			·"	
<ul><li>■ The amendment(s) was/were add action was not required.</li><li>□ The amendment(s) was/were add action was not required.</li></ul>						
Dated 10/15	5/12					
Signature(By a d	Poul A	nt or other erator – if	officer – i in the hand		officers have not er, trustee, or oth	
	CARL J	JOHN	I HUI	NTER	JR	
	(Тур	oed or prin	nted name	of person sig	ning)	
	PRESID	DEN	Γ			
	ľ	Title of ne	erson signi	no i		