## P12000039353

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2019 JUN -5 PM 2: 36
BEURLIANY OF STATE
PALLAHASSEE, FLORIDA

6/11/13

## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: KEY ERRANDS, INC. The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JUDI S. SKVERSKY Name of Contact Person Firm/ Company 631 SPANISH DRIVE SOUTH Address LONGBIAT KEY, FLORIDA 34228 City/ State and Zip Code JSSTREK@COMCAST.NET E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JUDI SKVERSKY <sub>at</sub> 617 \ 480-5379 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 □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

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

(Additional Copy is enclosed)

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

FILED

2011 JUN -5 PM 2: 36

KEY ERRANDS, INC.

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

GEORETARY OF STATE
TAIL AHASSEE, FLORIDA

P12000039353	<b>9</b> .
(Document Number of Con	rporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statista Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	oration: The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abb	corporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	631 SPANISH DRIVE SOUTH LONGBOAT KEY, FC
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	631 SPANISH DRIVE SOUTH LONGBOAT KEY, FL
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi  Name of New Registered Agent	office address in Florida, enter the name of the ce address:
	(Florida street address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	red Agent: n familiar with and accept the obligations of the position.
Signature of New R	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		John Doe	· · · · · · · · · · · · · · · · · · ·
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1)Change			
Add			
Remove			
2)Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
δ) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	(Be specific)	
•		
	•	•
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:	

The date of each amendment(s) a	doption: MAY 31, 2013
Effective date if applicable:	JNE 1, 2013
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following statement reach 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.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
•	' 31, 2013 _
Signature (By a c	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	JUDI S. SKVERSKY
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)