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(Re	equestor's Name)	1		
(Ad	ldress)			
(Ac	ldress)			
(Ci	ty/State/Zip/Phon	ne #)		
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16 APR 18 PM 2: 29

SECRETARY OF STATE DIVISION OF CORPORATIONS

APR 28 2016 C LEWIS **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: 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 Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed)

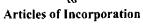
Mailing Address

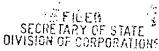
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

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

Articles of Amendment to





01	f		511.075.1 31 30M	OWALL
115 19 Pasco Cou	inty	Inc	16 APR 18 PM	2: 2
(Name of Corporation as current	tly filed with	the Florida Dept. of Stat	<u>e</u>)	
Plance	5004	5263		
(Document Number of	of Corporation	(if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s <i>Florida Prof</i>	fit Corporation adopts the	following amendment(s)	to
A. If amending name, enter the new name of the corporation:				
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A proj	ny," or "incorporated" (fessional corporation nur	The new or the abbreviation ne must contain the	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	\mathcal{N}_{ℓ}	M		
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		da, enter the name of the	<u> </u>	
/Florida e	street address)			
(Pinau si	ijeei adaress)			
New Registered Office Address:	(City)	, Florida	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	1t:	ept the obligations of the p	,	
Signature of New	Registered to	ant 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:	e, ana Sal	ly Smith, .	SV as an Add.	
X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		<u></u>		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change			-	
Add				
Remove				
5) Change				
Add		-		
Remove				
6) Change				
Add	-	_		<u></u>
Remove				- ur-

attach additional sheets, if necessary).	(Be specific)			
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for amondment nuclides for an eval	anas reelessification	an annollation	of icensed charge	
an amendment provides for an exch provisions for implementing the ame	ange, recrassification. odment if not contain	ed in the amendr	nent itself:	
(if not applicable, indicate N/A)				
				<u> </u>
	·			· · · · · · · · · · · · · · · · · · ·

he date of each amendment(s) adoption:	Mpric	2016	if other than the
late this document was signed.	l A to a second	,	FILES SECRETARY OF STATE DIVISION OF CORPORATION
Effective date <u>if applicable</u> :	4-11-1	b	DIVISION OF CORPORATION
	(no more than 90 days aft	er amendment file date)	16 APR 18 PM 2: 30
Note: If the date inserted in this block does no ocument's effective date on the Department of	not meet the applicable statu f State's records.	itory filing requirements, t	
doption of Amendment(s) (CI	HECK ONE)		
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of approval.	of votes cast for the amend	ment(s)
The amendment(s) was/were approved by the must be separately provided for each voting			
"The number of votes cast for the ame	endment(s) was/were sufficien	nt for approval	
by	oting group)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,
(vo	oting group)		
The amendment(s) was/were adopted by the action was not required.	board of directors without sl	nareholder action and share	cholder
The amendment(s) was/were adopted by the action was not required.	incorporators without sharel	nolder action and sharehold	der
Dated	11-16		
Signature	7		
(By a director, pres	sident or other officer - if dir		
	orporator – if in the hands of	a receiver, trustee, or other	r court
appointed fiduciary	Michae		ido (ino
	(Typed or printed name of po	erson signing)	
-	Pre	5	
	(Title of person of	cionina)	