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COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: Absolution Absolution P1200	ute Patriot Inc
The enclosed Articles of Amendment and fee are s	
Please return all correspondence concerning this m	atter to the following:
	Vito Mannone Name of Contact Person
	Absolute Patriot Inc
	Firm/ Company
2101	W. Burke S+
	Tampa, FL 33604
	City/ State and Zip Code
E-mail address: (to be a	used for future annual report notification)
For further information concerning this matter, plea	ase call:
Vito Mannone	at (813) 408-1718 Area Code & Daytime Telephone Number
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 Already Paid Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Misiling Address	Street Address
Will adment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
	rananassee, FL 52501

Articles of Amendment to Articles of Incorporation of

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

(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
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)
D. 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:
Name of New Registered Agent Vito Mannone
New Registered Office Address: New Registered Office Address: (City) New Registered Office Address: (City) New Registered Office Address: (City)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the 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.

X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	· Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	Other	John William Mannone	20110 Nob Oak An
Add			Tampa, FL 33647
Remove		A A	
2) Change	ST	Sarah Mannone	2101 W. Burke St
Add			Tampa, FL 33604
X Remove			
3) Change			****
Add			
Remove			
4) Change			
Add		•	
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach ac	ling or adding addition dditional sheets, if neces	ssary). (Be specifi	ic)			
	-					
			,			
			,			
<u>f an amı</u>	endment provides for a	an exchange, reclas he amendment if n	ssification, or can	cellation of issued	shares,	
(if n	not applicable, indicate	N/A)	or contained in th	e uniciament tise.	<u></u>	
,						
	 					
· · · <u>-</u>					-	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: November 14, 2016 (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	ill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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 adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated November / 4, 2016 Signature	
Signature Job Man	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Vito Mannone	
(Typed or printed name of person signing)	
President	
(Title of person signing)	