P120005191

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

And

SEP 17 2013

R. WHITE

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Cogswell Junovation Inc.
DOCUMENT NUMBER: P12000156942
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person
Cogswell Innovation Firm/Company
1744 N. Dixie Huy.
Fort Lauderdale FL 33305 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
David Lee logs Well at (954), 245-8877 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 Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee & Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

•	Articles of Amendmen to	fileD	
	Articles of Incorporatio	n	
Consumutano	of Tax	SEP -5 AM 10: 35	
(Name of Corporation as curr	rently filed with the Florida De	pt. destate IASSEE, FLORIDA	
• • •	•	/ P 12000056	947
(Document Nu	muer of Corporance. (if known)		
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	, Florida Statutes, this <i>Florida Pi</i>	rofit Corporation adopts the follow	ving amendment(s) to
A. If amending name, enter the new name of	of the corporation:		
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	"Corp," "Inc," or "Co". A p	pany," or "incorporated" or the professional corporation name mu	The new abbreviation st contain the
B. Enter new principal office address, if ap (Principal office address MUST BE A STRE)			<u> </u>
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)			
D. If amending the registered agent and/or new registered agent and/or the new reg		rida, enter the name of the	_
Name of New Registered Agent			•
_	(Florida street address,)	
New Registered Office Address:	(City)	, Florida(Zip Code)	
	(Cuy)	(Zip Code)	
New Registered Agent's Signature, if chang I hereby accept the appointment as registered		ccept the obligations of the position	n.
Signatu	ure of New Registered Agent, if ch	nanging	

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	PT John I	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	SV Sally	Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	CFO	Sanders, Regina L.	3106 NW 25th Ten. Oakland Park, FL. 33300
AddRemove		•	Oakland Park, FL. 33300
2) Change			
Add			
Remove			
3) Change			
Add			**************************************
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ssary). (Be specific)	ange(s) here:	
			
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	an arabanga malagsi	fication, or cancells	ition of issued shares.
n amendment provides for a ovisions for implementing the (if not applicable, indicate	he amendment if not	contained in the an	nendment itself:
ovisions for implementing th	he amendment if not	contained in the an	nendment itself:
ovisions for implementing th	he amendment if not	contained in the an	nendment itself:
ovisions for implementing th	he amendment if not	contained in the an	nendment itself:
ovisions for implementing th	he amendment if not	contained in the an	nendment itself:
n amendment provides for a ovisions for implementing the (if not applicable, indicate in the following the followi	he amendment if not	contained in the an	nendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	nent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stamust 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 share action was not required.	holder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Dated Signature	_ .
(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	court
DAUITY LEF C	COG SWETL
(Typed or printed name of person signing)	
CEO.	<u> </u>
(Title of person signing)	