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FILING CANCELLED RETURNED CHECK

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#### **COVER LETTER**

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: Orvill E Boxtrager
Name of Contact Person Firm/ Company Saint Augelo Rd ail address: (to be used for future annual report notification) For further information concerning this matter, please call: Orvill E. Boutrager at (850) 893 9937

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** 

TO: Amendment Section

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)

## FILING CANCELLED RETURNED CHECK

Articles of Amendment

Articles of Incorporation of

OB Interest I	Trev	
(Name of Corporation as currently filed with		
P 120000599	396	
(Document Number of Corpora	ation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amen	dinent(s) to
A. If amending name, enter the new name of the corporati	ion:	
	The	
name must be distinguishable and contain the word "corp "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc, word "chartered," "professional association," or the abbrevia	" or "Co". A professional corporation name must contain	tion 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)		
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office a		
Name of New Registered Agent		
(Flo	rida strect address)	
New Registered Office Address:	, Florida	
	(Ciṇ) (Zip Code)	
New Registered Agent's Signature, if changing Registered		
I hereby accept the appointment as registered agent. I am far	in the second se	
Signature of New Regis	stered Agent, if changing	
		7 - ~-
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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.

Mike Jones, V as Remov Example:	e, and Sa	lly Smith, SV as an Add.	
X Change	<u>PT</u>	John Doe	FILING CANCELLED
X Remove	<u>V</u>	Mike Jones	RETURNED CHECK
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	#	D Titus Boutrager	1479 Mission Rd Marienna Fl. 32448
X Add		,	Marianna F1. 32448
Remove			
2) Change		_	
Add			
Remove			
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Add			
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4) Change			
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Remove			· · ·
5) Change			
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Remove			
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E. If amending or adding additional Articles, enter change(s) here:

## FILING CANCELLED RETURNED CHECK

The date of each amendment(s) adoption: $2 - 2 - 3$	4013
Effective date if applicable: 2-2/-20	013
(no more than 90 d	days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The n by the shareholders was/were sufficient for approval.	umber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders throug must be separately provided for each voting group entitled to vo	
"The number of votes cast for the amendment(s) was/were s	sufficient for approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors w action was not required.	ithout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators withou action was not required.	ut shareholder action and shareholder
Dated 2/2/1/2013	
Signature (By a director, president or other officer selected, by an incorporator – if in the happointed fiduciary by that fiduciary)	r -if directors or officers have not been hands of a receiver, trustee, or other court
Orvill E (Typed or printed na	Boutrager me of person signing)
Presides (Title of person s	y 7