## P12-0000160790

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ENJOYAPPS, Inc.					
DOCUMENT NUME	ER: P12000060790					
The enclosed <i>Articles</i>	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	Nathan Mockler					
		Name of Contact Persor	1			
	ENJOYAPPS, Inc.					
		Firm/ Company				
	631 Inlet Dr.					
	Address					
	Marco Island					
	-	City/ State and Zip Code	e			
NATI	EMOC@GMAIL.COM					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	oconcerning this matter, pleas	se call:				
Nathan Mockler		at (239	919-6109			
Name of Contact Person		Area Code & Daytime Telephone Number				
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton	Address Iment Section on of Corporations a Building Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

ENJOYAPPS, Inc.						
(Name of Corporation a	as currently f	iled with the Flo	rida Dept. of State)			
P12000060790						
(Document	t Number of C	orporation (if kno	wn)			
Pursuant to the provisions of section 607.1006, Florida Statis Articles of Incorporation:	atutes, this Flo	orida Profit Corp	oration adopts the fo	llowing a	mendm	ent(s)
A. If amending name, enter the new name of the corpo	oration:					
				T	he nev	Ç.
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abb	"Inc," or "Co	". A professiona	"incorporated" or al corporation name	the abbi	eviatioi	n
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	7 <b>99</b> )			·		
Trincipal office address MOST BL A STREET ADDRE	<u> </u>	<u></u>				
				( ]> (/)	~	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)					2016	
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				<del>- 33/2/-</del>	~~~	
				्रा <u>च</u>	<del></del>	IT
D. If amending the registered agent and/or registered	office addres	s in Florida, ente	er the name of the	유 다 왕	မှု	C
new registered agent and/or the new registered off	ice address:			90E	9	
Name of New Registered Agent						
	(Florida street	address)				
New Registered Office Address:			, Florida			
	(C	ity)		(Zīp Coe	le)	
Now Designated Agentle Construction of shounding Designation	awad Agames					
New Registered Agent's Signature, if changing Registed I hereby accept the appointment as registered agent. I as	ereu Agent: m familiar wit	h and accept the	obligations of the pos	sition.		
Signatur	ura of Nav. Das	sistered Agent if	hanaina			

## 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 nevessary)

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	Collin Schnideider	14630 Harvest Dr.
Add			Carmel, IN 46032
X Remove			
2) Change	P.S	Nathan Mockler	631 Inlet Dr.
X Add			Marco Island, FL 34145
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
() O			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)	
Changes: Currently Collin Schneider is listed as President and Nathan Mockler as the Secretary. There is a change.	Collin
Schneider leaves the company and Nathan Mockler is named the President and Secretary.	
	<del></del>
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
<u>provisions for implementing the amendment if not contained in the amendment itself:</u> (if not applicable, indicate N/A)	
Collin Schneider sells 500,000 of his shares to Nathan Mockler. Nathan Mockler now holds 1,000,000 shares.	
	,

The date of each amendment(s) adoption:	if other than the
date this document was signed.  11/12/2015  Effective date if applicable:	
(no more than 90 days after amendment file de	ute)
Note: If the date inserted in this block does not meet the applicable statutory filing requirem document's effective date on the Department of State's records.	ents, this date will 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 a by the shareholders was/were sufficient for approval.	amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amenda	
"The number of votes east 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 an action was not required.	d shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and sha action was not required.	areholder
Dated 01/05/16	
Signature / Allin / 22	
(By a director, president or other officer – if directors or officers has selected, by an incorporator – if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary)	
	·
(Typed or printed name of person signing)	
President	

(Title of person signing)