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### **COVER LETTER**

TO: Amendment Section Division of Corpora				
NAME OF CORPORA DOCUMENT NUMBER	TION: SUO A	- Publisha	F	
The enclosed Articles of .	Amendment and fee are su	bmitted for filing.	<b></b>	
Please return all correspo	rolling.  Rolling.  Rolling.  Lutz  E-mail address to be us	Name of Contact Person  Name of Contact Person  ASSOCI-  Firm/ Company  Address  City/ State and Zip Cod  Man Q am	ition Aron	Talacigement
70d	contact Person	at (873	ode & Daytime Telephone Nur	<u> </u>
Enclosed is a check for th	e following amount made p	payable to the Florida Depa	artment of State:	
\$35 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

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

**Articles of Amendment** to Articles of Incorporation filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation, "company," or "incorporated "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 (Florida street address) New Registered Office Address: Florida (City) (Zip Code) 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

Page 1 of 4

## 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	<u>PT</u>	John Do	<u>oc</u>	
X Remove	<u>v</u>	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change				
Add		_		
Remove				
5) Change				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Al Attach additional sheets, if necessary)	. (Be specific)	<u>186(2) 1161.6</u> .		
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f an amendment provides for an exprovisions for implementing the am (if not applicable, indicate N/A)	change, reclassifi lendment if not c	cation, or cancella ontained in the am	tion of issued share endment itself:	es.
(i) not appricable, maleure 1971)				
			en e	

• •	option:	
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file	date)
Note: If the date inserted in this bardocument's effective date on the Dep	ock does not meet the applicable statutory filing require partment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the ficient for approval.	e amendment(s)
	roved by the shareholders through voting groups. The fole each voting group entitled to vote separately on the amer	
"The number of votes cast i	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	oted by the board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were adopaction was not required.	oted by the incorporators without shareholder action and	shareholder
Dated	1/26/16	
Signature		
(By a di	rector president or other officer - if directors or officers	have not been
selected	by an incorporator – if in the hands of a receiver, trusted fiduciary by that fiduciary)	;, or other court
	Toda Calpines	
-	(Typed or printed name of person signing)	
	Presido. A	
•	(Title of person signing)	