07/18/2018 the 67 Alleron Inc. OCO CONST 2 9238208 Pitton Pitton Division of Corporations	
Florida Department of State Division of Corporations Electronic Filing Cover Sheet	
Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.	
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To: Division of Corporations Fax Number : (850)617-6380 From: Account Name : ALRON ENTERPRISES, INC. Account Number : I20000000113 Phone : (321)951-7626 Fax Number : (321)723-8218 **Enter the email address for this business entity to be used for formure annual report mailings. Enter only one email address please.**	
Email Address: Image: Constant of the second se	
Electronic Filing Menu Corporate Filing Menu Help	B

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18/2013 10:07	é Alron Inc.	, ,	(FAX) 3217238218	P.002/005
,			FILED	
	1	Articles of Amendment to	2913 JUL 18 PM	3: 42
	٨	rticles of Incorporation		
ACC			C INC TALLAHASSEE, F	LORIDA
(Name of Corpo			t. of State)	
		0085695		
	(Document Number of C	Corporation (if known)		•
Pursuant to the provisions of se its Articles of Incorporation:	ction 607.1006, Florida S	Statutes, this Florida Pro	ofit Corporation adopts the following	g amendment(s) to
A. If amending name, enter t	he new name of the cor	poration:		•
name must be distinguishable "Corp.," "Inc.," or Co.," or t word "chartered," "profession	the designation "Corp,"	"Inc," or "Co". A pr	any," or "incorporated" or the al ofessional corporation name must c	_The new bbreviation contain the
B. Enter new principal office (Principal office address <u>MUS</u>	<u>address, if applicable;</u> <u>T BE A STREET ADDI</u>	<u>(ESS</u>)		
			· · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address (Mailing address <u>MAY BE</u>	<u>s, if applicable:</u> <u>A POST OFFICE BOX</u>	2 .	·	. ·
D. If amending the registered new registered agent and/	agent and/or registered o	d office address in Flor	ida, enter the name of the	
Name of New Register	<u>2a Agent</u>			
		(Florida street address)	· · ·	
New Registered Office	Addrase		. Florida	
New Registered Office	<u>Auuress</u>	(City)	, Florida(Zip Code)	· . ·
New Registered Agent's Signa	tuus if shanging Dist.			
I hereby accept the appointmen	t as registered agent. 1	am familiar with and act	cept the obligations of the position.	
		Registered Agent, If che	neine	
		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.

X Change	<u>PT</u> <u>John Do</u>	<u>ac</u>	
X Remove	<u>V</u> <u>Mike Jo</u>	ones	
X Add	<u>SV</u> <u>Sally Sr</u>	<u>mith</u>	
<u>Type of Action</u> (Check One)	Title	Name	Address
1) Change	1VP	JAMES SKELLEY	3721 NOAH CT
Add			PALM BAY, FL 32909
X Remove			
2) Change	1VP	WILLIAM F. MEYERS, IV	3721 NOAH CT.
X Add			PALM BAY, FL 32909
Remove			
3) Change	<u></u>		·
Add			
Remove			
4) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
5) Change			· · ·
Add			· .
Remove			
6) Change			
Add			
Remove			
		Page 2 of 4	

18/2013 10:08	Alron	lnc.	ſ	(FAX) 3217238218
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•				
E. If <u>nmending</u> or adding : (Attach additional sheets,	<u>idditional Artic</u>	les, enter chang	e(s)here:	
(Auton additional sheets,	ij necessary).	(De specific)		
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E 16 on amor J	l			
F. If an amendment provisions for implement	nting the amen	dment if not cor	<u>tion, or cancella</u> tained in the an	n <u>tion of issued shares.</u> ne <u>ndment itself:</u>
(if not applicable, in	ndicate N/A)			
			1	

P.004/005

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18/2013 10:08 AI	ron Inc.	(FAX) 3217238218	P.005/005
	JULY 18, 2	2013	
The date of each amendment(s) ado date this document was signed.	puom		, if other than the
Effective date if applicable:	JULY 18,	2013	· .
	(no more than 90 days	after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopt by the shareholders was/were suff		er of votes cast for the amendment(s)	· .
	oved by the sharcholders through vo ach voting group entitled to vote se	oting groups. The following statement parately on the amendment(s):	
"The number of votes cast fo	r the amendment(s) was/were suffic	cient for approval	
by	(voting group)		
The amendment(s) was/were adopt action was not required.		ut shafeholder action and shareholder	
The amendment(s) was/were adopt action was not required.	\sim	archolder action and shareholder	
Dated	ULY 18,/2013	\$7A	
selected,	by an incorporator - if in the hands	f directors or officers have not been s of a receiver, trustee, or other court	
appointed	I fiduciary by that fiduciary)	M MEYERS, III	
-	· · · · · · · · · · · · · · · · · · ·	name of person signing)	
	DIRECTOR, PF	RESIDENT	. ·
	(Title of p	erson signing)	 -
-			
-			
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