P130000 1947

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	-
		į

Office Use Only



000272137760

05/01/15--01003--014 **35.00

2015 MAY -1 AM 11:58
SEGRETARY OF STATE

MAY 0 7 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	TION: <u>JEREMY</u>	KNANFI ME	DF4
DOCUMENT NUMBE	TION: <u>JEREMY</u> R: <u>P130000</u>	1967	
The enclosed Articles of	Amendment and fee are sul	omitted for filing.	
Dlease return all corresno	ondence concerning this mat	ter to the following:	
ricase return an correspo	machee concessing this mac	ite to the following.	
_	LTEREMY	Kulau FF Name of Contact Persor	
		Name of Contact Persor	1
_			
_	_	Firm/ Company	
	14312 Kalou	L RIDGE D	ζ°
		Address	
	TAMPA F	City/ State and Zip Code	
		City/ State and Zip Code	2
		12 . 1	11 12 12 12 141
	E-mail address: (to be us	ed for future annual report	MED # A . CoM notification)
For further information	concerning this matter, pleas	se call:	
LTERE	MY KNAUFF	at (<u>8/3</u>	de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment of State:
	_	_	_
⚠ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy	☐\$52.50 Filing Fee Certificate of Status
	Certificate of Status	(Additional copy is	
		enclosed)	
			is enclosed)
Maili	ng Address	Street	Address
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
	Box 6327		Building
Tallah	nassee, FL 32314	2661 E	Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

JEREMY KALAUFF MEI	STA, INC
(Name of Corporation as currently filed with	1 the Fiorida Dept. of State)
P130 0000 1967	
(Document Number of Corpora	ation (if known)
rsuant to the provisions of section 607.1006, Florida Statute:	c this Florida Brafit Corneration adopts the following office
Articles of Incorporation:	s, this Provided Projet Corporation adopts the following anti-
•	55.50 55.50
If amending name, enter the new name of the corporation	on:
SPARTAN MEDEA, INC	poration," "company," or "incorporated" or the abbievi
me must be distinguishable and contain the word "corp Corp.," "Inc.," or Co.," or the designation "Corp," "Inc, ord "chartered," "professional association," or the abbrevio	" or "Co". A professional corporation name must contain
Enter new principal office address, if applicable:	
rincipal office address <u>MUST BE A STREET ADDRESS</u>)	
F	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	7
If amending the registered agent and/or registered office new registered agent and/or the new registered office agent and/or the new re	
new registered agent and/or the new registered office at	duress.
Name of New Registered Agent	
(Flo	orida street address)
New Registered Office Address:	Planida
New Registered Office Address.	(City), Florida(Zip Code)
·	
ew Registered Agent's Signature, if changing Registered	Agent:
ereby accept the appointment as registered agent. I am fan	
Signature of New Regis	stered Agent, if changing

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> <u>Joh</u>	n Doe		
X Remove	<u>V</u> <u>Mil</u>	ke Jones		
X Add	<u>SV</u> <u>Sal</u>	ly Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) Change			 <i></i>	
Add Remove				
2) Change			 	
Add Remove		,		
Change Add				
Remove				
4) Change Add			 	
Remove				
5) Change		/	 	
Add Remove				
6) Change	_		 	
Add				

amending or adding additional Article tach additional sheets, if necessary).	(Be specific)
/	
_	
/	
an amendment provides for an exchai	nge, reclassification, or cancellation of issued shares,
rovisions for implementing the amend	dment if not contained in the amendment itself:
(if not applicable, indicate N/A)	/ .
	/
, , , , , , , , , , , , , , , , , , , 	

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(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must 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 shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 4/25/15 Signature	
Signature (By a director, president or other officer – if directors or officers have not been	<u></u>
selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
JEREMY KOLLINE	
(Typed or printed name of person signing)	
(Title of person signing)	
· ·	