## P13000004395

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## **COVER LETTER**

TO:	Amendment Section
	Division of Corporations

NAME OF CORPO	D1200000420	SULTING, INC. 95	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	ANDREA L. AUS	TIN	
		Name of Contact Persor	1
	REX CONSULTII	NG, INC.	
		Firm/ Company	
	2319 DR. MLK JF	R. ST N	
		Address	
	SAINT PETERSE	3URG, FL 33704	<b>,</b>
		City/ State and Zip Code	3
ΟI	JRSALTYDOG@G	MAIL COM	
		sed for future annual report	notification)
	12 man addi eda, (to be di	iou ioi iuture unituari report	nounces,
For further information	on concerning this matter, pleas	se call:	
ANDDEAL	ALIOTINI	707	000 0074
ANDREA L.		at (	
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	urtment 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)
<u>Ma</u>	iling Address	Street	Address
	endment Section		ment Section
Division of Corporations		Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle	
		issee, FL 32301	

## Articles of Articles of Incorporation of

_KZX CONSCITUG.	/NC	
(Name of Corporation as currently filed with the Florid		
REX CONSULTING, INC. P1300000429		
(Document Number of Corporation (if kno	own)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flori</i> its Articles of Incorporation:	ida Profit Corporation adopts the following a	amendment(s) to
A. If amending name, enter the new name of the corporation:		
	7	he new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". word "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must co.	
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	in Florida, enter the name of the	
new registered agent and/or the new registered office address:		
Name of New Registered Agent		
(Florida street ad	ddress)	
New Registered Office Address:	. Florida	
(City)	(Zip Code)	
		# 55 m
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with a	and accept the obligations of the position.	HAR 10
Signature of New Registered Agent	t, 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:		пу этт, эт из ит нии.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	NADIA L. HOFFMEISTER	867 23RD AVE N, APT 3
Add			ST. PETERSBURG, FL 33704
Remove			
2) Change	VP	STEFAN M. HOFFMEISTER	867 23RD AVE N, APT 3
<b>✓</b> Add			ST. PETERSBURG, FL 33704
Remove			
3) Change			
Add			
Remove			
4) Change	<u></u>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific)
<u> </u>	
·	
an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(if not applicable, material with)	
	<u>,</u>
	100000

The date of each amendment date this document was signed	(s) adoption: JANUARY 1, 2014	, if other than the
Effective date if applicable:	JANUARY 1, 2014	
Effective date in applicable.	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated_FEE	BRUARY 19, 2014	
SC	ov a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court popointed fiduciary by that fiduciary)	_
	ANDREA L. AUSTIN	_
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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