P1300006264

(Re	equestor's Name)					
(Address)						
(Address)						
(Ci	ty/State/Zip/Phon	e #)				
PICK-UP	☐ WAIT	MAIL				
(P.	usiness Entity Nar	ma)				
(BL	isiness Enuty Nai	ne)				
(Do	cument Number)					
Certified Copies	_ Certificates	s of Status				
Special Instructions to	Filing Officer:					
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SECRETARY OF STATE
DIVISION OF CORPORATION

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COVER LETTER

TO: Amendment Section

Division of Corporations						
NAME OF CORPORATION: R. TUCKERMAN, Inc.						
DOCUMENT NUMBER: 91300006264						
The enclosed Articles of Amendment and fee are su	abmitted for filing.					
Please return all correspondence concerning this matter to the following:						
Rachel Tu	Ckerman					
	Name of Contact Person					
R. Tuck	erman					
	Firm/ Company					
210 Bal C	Moss Drive Address					
	Address					
Bal Harbi	OUT /FL 3315+ City/ State and Zip Code					
	City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, pleas	se call:					
Rachel Tuckerman	at (786) 426 7209					
Name of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 Filing Fee S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)					
Mailing Address	Street Address					
Amendment Section	Amendment Section					
Division of Corporations	Division of Corporations					
P.O. Box 6327	Clifton Building					
Tallahassee, FL 32314	2661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



R. Tuckerman, Inc.

15 JAN -5 PM 1: 14

(Name of Corporation as currently filed with the Florida Dept. of State) P13000006264

ent(s) to

(Document Number of Co	orporation (if known))	
Pursuant to the provisions of section 607,1006, Florida Stits Articles of Incorporation:	tatutes, this <i>Florida</i>	Profit Corporation ado	pts the following amendme
A. If amending name, enter the new name of the corp R. TUCKERMAN, P. A.	oration:		ers
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the above	"Inc," or "Co". A	npany," or "incorpord professional corporati	The new ated" or the abbreviation ion name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u>ESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		lorida, enter the name	of the
Name of New Registered Agent			
	(Florida street addre	ess)	
New Registered Office Address:		, Florida	
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a		accept the obligations	of the position.
Signature of New	Revistered 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:	, una bai	ւմ։ թաււս,	от из ил лии.	
X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	nith_	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add		_		HELD LY-
Remove				
6) Change				
Add				
Remove				

. <u>If</u> :	amending or a	adding ad	ditional Artic	les, enter	change	s) here:		
(At	tach aaaiiiona	i snecis, ij Hima	(necessary). NDUROA	(Be spec	יוס (<i>וווי)</i> . וע	conal	corvice	condered
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The date of each amendment(s)	adontion:	1/1/15	SEURETARY O	F STATE PORATIONS	, if other than the
date this document was signed.		1 1: -	DIAISING		
Effective date <u>if applicable</u> :)	/1/15	15 JAN -5		
	(no	more than 90 days	after amendment file do	ite)	
Adoption of Amendment(s)	(CHECK	(ONE)			
☐ The amendment(s) was/were a by the shareholders was/were			er of votes cast for the a	mendment(s)	
☐ The amendment(s) was/were a must be separately provided.					
"The number of votes ea	ist for the amendme	nt(s) was/were suffi	cient for approval		
by		group)	,,,		
	(voting g	(roup)			
☐ The amendment(s) was/were a action was not required.	dopted by the board	d of directors withou	ut shareholder action and	i shareholder	
The amendment(s) was/were a action was not required.	dopted by the incor	porators without sh	areholder action and sha	reholder	
Dated	2/15/14				
Signature	La-				
(By a selec		ator - if in the hand	directors or officers have sof a receiver, trustee, o		
	<u> </u>	chel Tuc	kermah name of person signing)		_
				•	
		In Corpor	ator		
		(Title of p	erson signing)		