P130000009875

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CÓVER LETTER

TO: Amendment Section Division of Corporations

Dineen Pasl	houkos Wasylik, P.A.	<u> </u>
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Dineen Pashoukos	Wasylik	
Dineen Pashoukos	Name of Contact Persor Wasylik, P.A.	
PO Box 48323	Firm/ Company	
Tampa, FL 33646	Address	
	City/ State and Zip Code	2
service@ip-appeals.com	า	
E-mail address: (to be	e used for future annual report	notification)
For further information concerning this matter, pl	lease call:	
Dineen Pashoukos Wasylik	813 at (778-5161
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount ma	de payable to the Florida Depa	ertment of State:
\$35 Filing Fee Status Certificate of Status		□\$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	Ameno Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the l	Placide Dent of State)
P1300009875	In the period state
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this	Florida Profit Corporation adopts the following ar
ts Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	or in the state of the state o
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	'Co". A professional corporation name must con-
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	Suite 300
	Tampa, FL 33637
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n/a
 If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres 	
Name of New Registered Agent	
(Florida sı	reet address)
New Registered Office Address:(City	, Florida
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	<u>t:</u>
Signature of New Registered	Agant 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.

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
X 1) Change	P	Dineen Pashoukos Wasylik	PO Box 48323
Add			Tampa, FL 33646
Remove			
2) Change			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amending or adding additional Articles, enter change(s) here</u> : (Attach additional sheets, if necessary). (Be specific) N/A					
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F. <u>If an an</u>	nendment provides for an ex ons for implementing the an	change, reclassificat	ion, or cancellation	of issued shares,	
<u>provisi</u>	ons for implementing the an not applicable, indicate N/A)	nendment if not con-	tained in the ameno	<u>lment itself:</u>	
N/A	noi applicable, inalcale N/A)				
11/7					· · · · ·
			· · · · · · · · · · · · · · · · · · ·		

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)	
(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 8/13/2013	
Signature Chon JON WOOD	
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Dinnen Pashowas Wasyuk (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
Président	
(Title of person signing)	