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COVER LETTER

TO: Amendment Section
Division of Corporations

TROY GLOB	ALCONSULTING IN	D. '
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
LAWRENCE J DUTT	ON III	
TROY GLOBAL CON	Name of Contact Person ISULTING INC.	1
2740 SW MARTIN D	Firm/Company OWNS BLVD.	
PALM CITY, FL. 3499	Address 90	
	City/ State and Zip Cod	9
JD@TROYGLOBALCON	SULTING.COM	
E-mail address: (to be t	used for future annual report	notification)
For further information concerning this matter, plea	ase call:	
LAWRENCE J DUTTON III	772 at (485 4510
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	e payable to the Florida Depa	artment of State:
\$35 Filing Fee \$\times \text{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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallabasses, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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(Name of Corporation as current	tly filed with the Flo	rida Dept. of State)		
* * * * * * * * * * * * * * * * * * *	er of Corporation (if k	nown)		•
Pursuant to the provisions of section 607.1006, Fl its Articles of Incorporation:	orida Statutes, this Fl	orida Profit Corporation add	opts the following a	imendment(s) t
A. If amending name, enter the new name of the		<i>A</i>		
	A	1 A	T	he new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	Corp," "Inc," or "Ce	". A professional corporat		
B. Enter new principal office address, if applic	able:	NA		
(Principal office address <u>MUST BE A STREET</u>		•	死cs	2
				9
			<u> </u>	E T
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	EBOX)	NA	ARY OF ST	FILED
			i i i i i i i i i i i i i i i i i i i	26
D. If amending the registered agent and/or reg		s in Florida, enter the name	e of the	
new registered agent and/or the new registe	ered office address:			
Name of New Registered Agent	NA			
,				
	(Florida stree	address)		
New Registered Office Address:		, Florida		
Her heganetta Office haaress.	(City)	, 1101104	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age		h and accept the obligations	of the position.	
Signature of	of New Registered Ag	ent, 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	PT John	Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
_X Add	SV Sally	/ Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
X 1) Change	PSCD	LAWRENCE J. DUTTON III	2740 SW MARTIN DOWN
Add			PALM CITY FL. 34990
Remove			
2) Change	VD	RUSSEL H. PHELPS III	2740 SW MARTIN DOWN
X Add			PALM CITY FL. 34990
Remove	VD	VINCENT F. BONSIGNORE	2740 SW MARTIN DOWN
3) Change X Add			PALM CITY FL. 34990
Remove			
4)Change	TD	CHARLES AFRICANO	2740 SW MARTIN DOWN
X Add			PALM CITY FL. 34990
Remove			***************************************
5) Change	***************************************		
Add			
Remove			
6) Change			
Add			·
Remove			

Attach	<mark>nding or adding addi</mark> additional sheets, if n	ecessary). (l	Be specific)			
				Δ.	A	
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f an ai	mendment provides : sions for implementi	<u>for an exchang</u> ng the amendr	<u>ge, reclassifica</u> nent if not cor	<u>tion, or cancel</u> tained in the a	lation of issued	<u>shares,</u> f·
(ij	f not applicable, indic	ate N/A)	nent ii not con	itamica in the a	menument noci	<u></u>
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The date of each amendment(s) adoption:	, if other than the
Effective date <u>if applicable</u> :	
(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.	
AUGUST 23 2013	
Signature Laurence J Lauther III	
(By a director, president by 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)	
Lawrence J Dutton III (Typed or printed name of person signing)	
incorporator Fresident & Secretary (Title of person signing)	01414