P13000018430

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SECTION OF SIMILAR BUILDING SIMILAR BUILDING SHIPLING SIMILAR STATES

Amund CC (1a 8.15.13

COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corp	orations		
NAME OF CORPO	RATION: Your Solu	utions Compa	ny
DOCUMENT NUMI	BER: P13000018	430	
	of Amendment and fee are su		
Please return all corre	spondence concerning this ma	atter to the following:	
	William B Plym	noton	
		Name of Contact Perso	n
	Your Solutions		"
		Firm/ Company	.
	2268 Mayport		
		Address	
	Atlantic Beach	/FL 32233	
	· · · · ·	City/ State and Zip Cod	e
the	solutionscorp@		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
William B F	lympton	at (904	,444-5792
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ling Address ndment Section		Address Iment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

Your Solutions Company

P13000018430	led with the Florida Dept. of St	ate)
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Cor	poration adopts the following amendment(s
A. If amending name, enter the new name of the con	rporation:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the designation or the designation of the designatio	" "Inc," or "Co". A profession	
B. Enter new principal office address, if applicable:	2268 M	ayport rd #122
(Principal office address <u>MUST BE A STREET ADD</u>	D.D.C.C.	Beach, FI
	32233	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u> </u>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		er the name of the
Name of New Registered Agent William E	B Plympton	
2268 N	Mayport Rd. #122	2
New Registered Office Address: Atlantic	(Florida street address) c Beach	_, Florida 32233 (Zip Code)
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I		obligations of the position.

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 Jol	<u>in Doc</u>	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Donald R Nutter	2530 Makua Ave West
X Add			Atlantic Beach, FL 32233
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		and the second	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific)			

	747			
A. A. A. M.				
M				
	···			
				
n amendment provides for an exch ovisions for implementing the ame	ange, reclassification ndment if not contai	n, or cancellation ned in the amen	n of issued sl dment itself:	iares,
(if not applicable, indicate N/A)				
11.77				
-				
- 114				
				

The date of each amendment		, if other than the
date this document was signed. Effective date if applicable:	August 6th 2013	
enteuve date <u>ii appiicable</u> .	(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.	
	e approved by the shareholders through voting groups. The following statement d 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/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated Au	gust 6th 2013	
Signature 7	3:11 Phu	
(B se	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	_
	William B Plympton	
	. (Typed or printed name of person signing)	_
	President	

(Title of person signing)