P1300023002

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	,
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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FILED

2019 APR -2 PM 3: 38

SECREGARY OF STATE
TALLAHASSEE, FLORIDA

48/13

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Cross County Tisswan Ce Services, Inc.

DOCUMENT NUMBER: P 130 000 28002

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

The faulkner Firm, AA.

Firm/ Company

5529 Golf Ridge Dr. Apt. D.

Address

Saint Louis, Mo 63128

For	further	information	concerning	this matter	, please call:	•

Debra Faulkner

at 417, 414-8992

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

□\$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)

Mailing Address

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

Street Address

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

Articles of Amendment FILED to Articles of Incorporation 2013 APR - 2 PM 3:38 currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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 Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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: X Change	PT John	<u> Doe</u>		
X Remove	V Mike Jones			
X Add	SV Sally	y Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	<u>PD</u>	Wayne M Cross	1012 Greenbriar Drive	
Add		J	Brandon, FL 33511-7716	
X Remove				
2) Change Add	PD	Wayne & Cross	1012 Greenbriar Drive Brandon, FL 33511-7716	
Remove				
3) Change		Joan M Cross	1012 Greenbriar Drive	
X Add			Brandon, FL 33511-771	
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

ttach additional sheets, if		e specific)		•	
	N/A				
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				T. HERBORN	 -
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f an amendment provides	for an evelana	a realassificat	ion or cancel	llation of iccurs	l charac
provisions for implement	ing the amendm	ent if not cont	ained in the a	amendment itse	lf:
(if not applicable, indi	icate N/A)				
,	11/4				
<i></i>	۷/11				
<u> </u>					

The date of each amendment(s) a	doption: 5-7'7-13
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach 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 add action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated3	Delia De Jan Jan
(By a d	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	Debra A Faulkner
	(Typed or printed name of person signing)
	Incorporator
	(Title of person signing)