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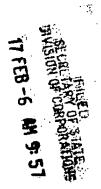
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations				
NAME OF CORPORATION: S.A.K. + ASSOCIATES Mant, Inc.				
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Stephanie A. Kolenul Name of Contact Person  S.A. K & ASSOCIATES, Mgmt, Inc.  Firm/Company				
S.A. K & ASSOCIALS, Mont., Inc.				
8095 College PKWY, Ste DUSI				
F1. Myers, F1 33919 City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Stephanie A - Kulenut at (239) 645-0830  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 Certificate of Status  Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations				

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

P.O. Box 6327

## **Articles of Amendment** to Articles of Incorporation

	of &
5.A.K. + A	Associates Mamt, Inc
(Name of	Corporation as currently filed with the Florida Dept. of State)
PI3	00031071
, , -	(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.16 its Articles of Incorporation:	006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new nan	ne of the corporation:
	The new
"Corp.," "Inc.," or Co.," or the designation of the	applicable:
C. Enter new mailing address, if application (Mailing address MAY BE A POST O	
D. If amending the registered agent and new registered agent and/or the new  Name of New Registered Agent	or registered office address in Florida, enter the name of the registered office address:
-	(Florida street address)

New Registered Office Address:

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

(City)

, Florida

(Zip Code)

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	<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
1) Change	D	Dela Kahn	8095 College Plemy Ste 2031
Add			5le 2031
Remove			FL. Myers, F13391
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	·		
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific)
<u></u>	
<u> </u>	
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
<u>provisions for implementing the ame</u>	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: 4 August 2017, if other than the date this document was signed.
Effective date <u>if applicable</u> :  (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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.
Signature  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)
(Typed or printed name of person signing)
Registered Agent (Title of person signing)