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And

MAR 18 2015

R. WHITE

#### **COVER LETTER**

Division of Corporations **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

#### . FILING CANCELLED

RETURNED CHECK		ndment	F7)	
	to Articles of Incor	i, i i	.ub.ru .u	
	of	. 4c MAR 1	6 թկ 3։ Ակ	
Cantry	Clas Loxo	14 Magazi	6 PH 3:04	<u>_</u>
(Name of Corporation as cur	rently filed with the Flor	ida Dept. of State		
()	130000 3	1344	, . <b>.</b>	
(Document Nu	umber of Corporation (if k	nown)		
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	6, Florida Statutes, this Flo	orida Profit Corporation ado	pts the following	g amendment(s) to
A. If amending name, enter the new name	of the corporation:			
				The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	n "Corp," "Inc," or "Co	". A professional corporati	ated" or the al	bbreviation
B. Enter new principal office address, if a principal office address MUST BE A STRE				
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF				-
D. If amending the registered agent and/or new registered agent and/or the new re  Name of New Registered Agent		s in Florida, enter the name	of the	
_	(Florida street	address)		
	(1 10 1 mm b) 0 0 0			
New Registered Office Address:	(0)	, Florida	(Zip Code)	-
	(City)		(ZIP Code)	
New Registered Agent's Signature, if chan				

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 Doe				
-				FILING CANCELLED		
X Remove	$\underline{\mathbf{v}}$	Mike Jon	<u>es</u>	RETURNED CHECK		
X Add	<u>sv</u>	<u>Sally Smi</u>	<u>th</u>			
Type of Action (Check One)	<u>Title</u>		Name		Address	
1) Change	VA		Milabeth	A Pritchar	d 5741 Richmond Ra Jacksonville, FT.32210	
Add Remove					Vacksanuille, H.32210	
2) Change	<del></del>	<del>-</del> -		<del></del>		
Add						
Remove 3) Change						
Add			· · · · · · · · · · · · · · · · · · ·			
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6) Change			<del></del>			
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## FILING CANCELLED RETURNED CHECK E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

### FILING CANCELLED RETURNED CHECK

The date of each amendment(s) adoption: Morow 10, 2015 date this document was signed.	_, if other than the
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)	
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 March 11, 2015	
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)	
Eva 16 Cance	
(Typed or printed name of person signing)	<del>_</del>
Aresident	_
(Title of person signing)	