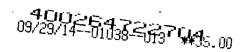
P13000056814

(Requestor's Name)	_
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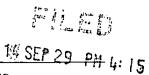
TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: MIKE LANICH	I,INC.			
DOCUMENT NUMI	BER: P13000056814				
	of Amendment and fee are su	ibmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	LAUREN BAGGE	ERSON			
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	1		
	SPEEDWAY BO	OKKEEPING SE	RVICE		
		Firm/ Company			
	1575 AVIATION CTR PKWY #507				
		Address			
	DAYTONA BEAC	CH, FL 32114			
		City/ State and Zip Code	е		
SPI	EEDWAYBOOKK	EEPING@YAH	OO.COM		
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
LAUREN BA	GGERSON	at (386	, 258-8789		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made p	payable to the Florida Depa	ertment 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)		
	ing Address		Address ment 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 Articles of Incorporation of



MIKE LANICH, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

nent(s) to

P13000056814		TALL	all same of the
(Document Number	of Corporation (if known)	\$	क्षेत्रक र नजर्म सिंहि हैं
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	ida Statutes, this <i>Florida Pro</i>	ofit Corporation add	opts the following amendme
A. If amending name, enter the new name of the	corporation:		
			The nev
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co. word "chartered." "professional association," or th	rp," "Inc," or "Co". A pi		
B. Enter new principal office address, if applicat	ble:		
(Principal office address <u>MUST BE A STREET Al</u>	DDRESS)	-	
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	30X)		
(maining data ess mail surfit out of the s			
			
D. If amending the registered agent and/or regist		ida, enter the name	e of the
new registered agent and/or the new registere	ed office address:		
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)		(Zip Code)
New Registered Agent's Signature, if changing R	egistered Agent:		
I hereby accept the appointment as registered agent		cept the obligations	of the position.
G:	N D to IA CCI		

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	S-T	JUSTIN BROOKS	21 EDGE LANE
Add			PALM COAST, FL 32164
Remove			
2) Change	S-T	CLYDE M. ZIPPERER	615 N SINCLAIR AVE
Add			TAVARES, FL 32778
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sh	ing additional Articles, enter change(s) here: eets, if necessary). (Be specific)
	
. <u>If an amendment p</u>	rovides for an exchange, reclassification, or cancellation of issued shares,
provisions for imp	lementing the amendment if not contained in the amendment itself: ole, indicate N/A)
·• - •	ISSUED SHARES ARE BEING TRANSFERRED FROM JUSTIN
BROOKS TO CLY	YDE M. ZIPPERER.
<u>.</u>	

09/24/2014	, if other than the
The date of each amendment(s) adoption: 09/24/2014 date this document was signed.	, it other than the
Effective date if applicable: 09/24/2014	
(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_09/24/2014	
Signature Dil Sanici	
(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)	
MIKE LANICH	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	