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(Re	equestor's Name)				
(Ad	ldress)				
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PICK-UP	WAIT	MAIL			
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Special Instructions to Filing Officer:					
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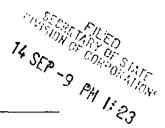
COVER LETTER

TO: Amendment Section

Division of Corpo	orations		
NAME OF CORPO	RATION: JOHNFER	CORP	
DOCUMENT NUM	P1300006824	8	
DOCUMENT NUMI	DEK:		
The enclosed Articles	of Amendment and fee are sul	omitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	YOKASTA FERN	ANDEZ	
		Name of Contact Person	
	JOHNFER CORF	· · · · · · · · · · · · · · · · · · ·	
		Firm/ Company	
	206 VIA TUSCAN	NY LOOP	
		Address	
	LAKE MARY FL	32746	
		City/ State and Zip Code	2
GA	BBYOKY@AOL.	COM	
		sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
YOKASTA F	ERNANDEZ	_ at (386	de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or 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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
34.	iling Address	Straat	Address
	nendment Section		Iment Section
	vision of Corporations		on of Corporations
). Box 6327		Building Executive Center Circle
I a I	lahassee, FL 32314	∠001 E	vecative Cetter Cites

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



JOHNFER CORP

(Name of Corporation as	currently filed with the Flor	rida Dept. of State)		\ < 3
P13000068248				
(Documen	t Number of Corporation (if k	nown)		
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this Fl	orida Profit Corporation ado	pts the following	; amendment(s) to
A. <u>If amending name, enter the new na</u> N/A	me of the corporation:			
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered." "professional associa	ation "Corp," "Inc," or "Co	 A professional corporati 	ated" or the ab ion name must c	The new obreviation contain the
3. Enter new principal office address, Principal office address <u>MUST BE A S</u>		N/A		
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u> (N/A		
 If amending the registered agent an new registered agent and/or the new 		s in Florida, enter the name	of the	
Name of New Registered Agent	N/A			
	(Florida street	address)		
New Registered Office Address:	N/A	, Florida		
	(City)		(Zip Code)	
New Registered Agent's Signature, if cl hereby accept the appointment as regist	n <mark>anging Registered Agent:</mark> ered agent. I am familiar wit	h and accept the obligations (of the position.	
Sis	enature of New Registered Age	ent 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	GABRIEL FERNANDEZ	206 VIA TUSCANY LOOP
Add			LAKE MARY FL 32746
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			·
6) Change			
 1		<u> </u>	
Add			<u></u>
Remove			

/A	dditional sheets	s. if necessary).	icles, enter chan; (Be specific)			
						
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If an an	nendment prov	vides for an exc	hange, reclassifi	cation, or cance		HATES,
provisi	ions for impler	menting the am	hange, reclassifi endment if not c	cation, or cance ontained in the	amendment itself:	
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<u>provisi</u> (<i>if</i>	ions for impler	menting the am	change, reclassifi	cation, or cance	amendment itself:	iai es,

The date of each amendment	(s) adoption: 09/02/2014	, if other than the
date this document was signed.	00/02/2014	
Effective date <u>if applicable</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	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
	e approved by the sharcholders 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_09/0	2/2014	
Signature (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)	
,	YOKASTA FERNANDEZ	
	(Typed or printed name of person signing)	<u> </u>
	P/D	
	(Title of person signing)	