P13000073502

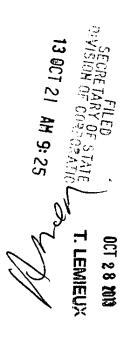
(Re	equestor's Name)			
(Ad	ddress)			
(Ad	ddress)			
(Ci	ity/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bi	usiness Entity Nar	me)		
(De	ocument Number)			
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				
·				

Office Use Only



700252688177

10/21/13--01037--009 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Tacher Co	onsulting	g, Inc.		
	30000735			·	
The enclosed Articles of Amend	ment and fee are su	bmitted for fili	ing.		
Please return all correspondence	concerning this ma	tter to the follo	wing:		
Robe	rt Tacher				
Tach	er Consult	ing, Inc.	ontact Person		
1411	St. Gabrie	lle Lane	 	3506	
West	on, FL 333	326	dress		
		•	and Zip Code		
	acher@ta			·	
For further information concerni	·		,	,	
Robert Tacher		at ı	850	, 902-7795	
Name of Contact	Person		Area Coo	le & Daytime Telephone Number	_
Enclosed is a check for the follo	wing amount made	payable to the	Florida Depa	rtment of State:	
	3.75 Filing Fee & rtificate of Status	□\$43.75 Fi Certified (Additional enclosed)	Copy al copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Addr Amendment S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations		Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle	

Articles of Amendment to Articles of Incorporation of

Tacher Consulting, Inc.		:		
(Name of Corporation as currently filed with the Flo	orida Dept. of State)			
(Document Number of Corporation (if known)				
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:		g amendme	ent(s) to	
A. If amending name, enter the new name of the corporation:				
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "F	Co". A professional corporation name must of A."	_The new bbreviation contain the	1	
B. Enter new principal office address, if applicable:	4581 Weston Road			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Suite #304			
	Weston, FL 33331			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4581 Weston Road		J.	
	Suite #304	75	NSE.	
	Weston, FL 33331	9 ec 1	152K	
D. If amending the registered agent and/or registered office address: Name of New Registered Agent	ess in Florida, enter the name of the	OCT 21 AM 9: 25	TARY OF STAT OF COPPORAT	
(Florida stre	et address)	က်	Ç,	
New Registered Office Address:	, Florida			
(City)	(Zip Code)			
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar was Signature of New Registered Agent.	· · · · · · · · · · · · · · · · · · ·			

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.

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jos	nes	
X Add	<u>sv</u>	Sally Sm	nith .	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove			•	
2) Change		<u></u>		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				ŕ
Add		_		
Remove				
5) Change		_		
\equiv				
Remove				
6) Change				
Add				
Remove			•	

(1 Ittabil Madaillo ilai bii	2. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
dd EIN number.	EIN is 46-3600766				
	,				
					
	<u> </u>				
If an amandment n	rovides for an exchange, reclassification, or cancellation of issued shares,				
provisions for imp	plementing the amendment if not contained in the amendment itself:				
(if not applicat	ble, indicate N/A)				
	· · · · · · · · · · · · · · · · · · ·				
		<u> </u>			

The date of each amendment(s) a	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than so adjudajior amenament jue actor)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adby the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	proved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ac action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adaction was not required.	lopted by the incorporators without shareholder action and shareholder	
Dated_16 Octo	ober 2013	
Signature		
select	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 nted fiduciary by that fiduciary)	
	Robert Tacher	
	(Typed or printed name of person signing)	
	President	
ν	(Title of person signing)	