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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: FVI Investiç	gations & Recov	ery Inc		
DOCUMENT NUMBER: P13000077361					
	of Amendment and fee are sul				
Please return all corres	spondence concerning this mat	ter to the following:			
	Keith Breading				
		Name of Contact Person	I.		
	FVI Investigations & Recovery Inc				
		Firm/ Company			
	5304 1st Ave N				
		Address			
	St Petersburg, Flo	orida 33710			
		City/ State and Zip Code			
kei	thbreading@earth	link.net			
		ed for future annual report	notification)		
For further information concerning this matter, please call:					
Keith Breadir	na	at (727	、321 6007		
	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department 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)		
Mailing Address			<u>Address</u>		
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			
		Tallahassee, FL 32301			

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

FVI Investigations & Recovery Inc	3: 22
(Name of Corporation as currently filed with the	Florida Dept. of State)  TAL AND THE STATE OF THE STATE O
P13000077361	The state of the s
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
FVI Investigations & Recovery (GB) Inc	The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	5304 1st Ave N
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	St Petersburg
	Florida 33710
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5304 1st Ave N
	St Petersburg
	Florida 33710
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida :	street address)
New Registered Office Address:	, Florida
(Cir	ty) (Zip Code)

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

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 <math>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 Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
_X Add	<u>sv</u>	Sally Sn	<u>uith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		<del></del>		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

	(Be specific)
	<u> </u>
<del></del>	
lf an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and and in the amendment itself:
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:

The date of each amendment	t(s) adoption: June 12th 2014	if other than the
date this document was signed		
Effective date if applicable:	June 12th 2014	
Enective date <u>in applicable</u> .	(no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
<u> </u>	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we	re adopted by the incorporators without shareholder action and shareholder	
action was not required.	a 0th 2011	
Dated_Juri	e 9th 2014	
Signature _	disendry	
	By a director, president or other officer – if directors or officers have not been	
	elected, by an incorporator – if in the hands of a receiver, trustee, or other court populated fiduciary by that fiduciary)	
-1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Keith Breading	
	(Typed or printed name of person signing)	
	V	
	(Title of person signing)	