PB0001754/

(Re	equestor's Name)	
(Ac	idress)	- //
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(Ci	ty/State/Zip/Phone	
PiCK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Dc	ocument Number)	<u> </u>
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer.	

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JUN 1 6 2017 S. YOUNG



COVER LETTER

Q

2661 Executive Center Circle Tallahassee, FL 32301

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION	:A_	Paring	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBER:	<u> 21300</u>	<u>00.77541</u>	
The enclosed Articles of Amen	dment and fee are sub	omitted for filing,	
Please return all correspondence	e concerning this mat	for to the following:	
		Name of Contact Person Wing Firm/Company Address	
		City/ State and Zip Code	
For further information concern	ning this matter, please	e call:	
Name of Confac	rt Person	at (<u>954</u> Area Coo) 34–6381 de & Daytime Telephone Number
Enclosed is a check for the follo	owing amount made p	ayable to the Florida Depa	rtment of State:
	43.75 Filing Fee & ertificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Add Amendment 9 Division of C P.O. Box 632	Section orporations	Amend Divisio	Address ment Section n of Corporations Building

Articles of Amendment

10

Articles of Incorporation

of

to

_	Inc. ently filed with the Florida Dept, of State)	
R 130000 77541 (Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, t its Articles of Incorporation:	his Florida Profit Corporation adopts the fo	llowing amendment(s
A. If amending name, enter the new name of the corporation		
name must be distinguishable and contain the word "corpora" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	or "Co". A professional corporation name	The new the abbreviation must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		33076
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add Name of New Registered Agent	ress:	
	a street address)	
New <u>Registered Office Address</u> :		
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am jamili		ition.
Signature of No	w 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; V = Treasurev; 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> <u>Joh</u>	<u>in Doc</u>	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
_X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1)Change	_VP_	Patrick Daly	Mener Core Springs, F13307
Add		1	Men Core Springs, F1 3307
_X, Remove			
2) Change			
Add			
Remove			
3) Change		 _	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Ar (Attach additional sheets, if necessary).	<u>ticles, enter change(s) here</u> : <i>tBe specific</i>)
	,
	A
	_/
<u> </u>	
If an amendment provides for an exc provisions for implementing the am	change, reclassification, or cancellation of issued shares, rendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
Anewno	art Affected
•	

The date of each amendment(s) adoption:	4/15 /2017	, if other than the
date this document was signed.		
Effective date if applicable:	4/15/207	
· (no i	more than 90 days after amendment file date)	
Note: If the date inserted in this block does not med document's effective date on the Department of State's		date will not be listed as the
Adoption of Amendment(s) (CHECK	ONE)	
The amendment(s) was/were adopted by the shareh by the shareholders was/were sufficient for approxi		t(s)
☐ The amendment(s) was/were approved by the share must be separately provided for each voting group		nent
"The number of votes cast for the amendment	t(s) was/were sufficient for approval	
by	······································	
tvoting gra	oup)	
☐ The amendment(s) was/were adopted by the board action was not required.	of directors without shareholder action and sharehold	der
The amendment(s) was/were adopted by the incorpaction was not required.	orators without shareholder action and shareholder	
Dated 4/15 / 2017	7	
Signature	My President	
	or other officer - if directors or officers have not been or - if in the hands of a receiver, trustee, or other contents.	
appointed fiduciary by the		
	Zeen Day	
(Typed	or printed name of person signing)	
	Prosident	
	(Title of person signing)	