# P13000 8035

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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates o	f Status
Special Instructions to f	Filina Officer:	

Office Use Only



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MAY 31 2018 S. YOUNG



### COVER LETTER

Division of Corporations NAME OF CORPORATION: \_\_ DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JAMES Firm Company 5030 CHAMPION BLUD FLORIDA CONSULTANT DYAHOO, COM
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

# Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# Articles of Amendment to Articles of Incorporation of

! THE BOX STORE, INC	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P13000082035	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section $607.1006$ . Florida Statutes, this $I$ its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
FLORIDA STORAGE WAREHOUS name must be distinguishable and contain the word "corporation	SING COFFORATION The new
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 "I	To". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	542 DOUGLAS AVE
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	ALTAMONTE SPRINGS, FL 32714
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
SAME	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	
New Registered Office Address:	Florida F
New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiae w	(City)  (City)
Signature of New Re	rgistered 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; F + Treasurer; S + Secretary; D + Director; TR + Trustee; C + Chairman or Clerk; CEO + Chief Executive Officer; CFO + Chief Emancial 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		SAME	
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>			Address
1) Change				<del></del>	
Add					
Remove				,	/
2) Change	<del></del>				
Add					
Remove					
3.) Change		<del>-</del> -			<del></del>
Add			/		
Remove					
4) Change					
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Remove					
5) Change			<u> </u>		
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6) Change		- /		<del></del>	
Add		,			
Remove					

If amending or adding additional Arti (Attach additional sheets, if necessary).	
/	/
If an amondment provides for an evol-	nange, reclassification, or cancellation of issued shares.
provisions for implementing the amer (d'not applicable, indicate N/4)	endment if not contained in the amendment itself:
(if mix (dyint and , mint the 1671)	
	<u>/</u>

	, if other than the
date this document was signed.	
Effective date if applicable: MAY \5, 20\8 (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date widocument's effective date on the Department of State's records.	ill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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 east 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.	
Dated5/15/18	
O-M	
(He edirector, 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)	
JAMES FISCHER	
(Typed or printed name of person signing)	
(P) INCORPORATOR (Little of person signing)	
( Little of person signing)	