## P13000087509

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<b>\</b>	•	<b>,</b>
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APPROVED

L. Lewis

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: 33 DEGREES, INC.  DOCUMENT NUMBER: P13000087509					
The enclosed <i>Articles of Amendment</i> and fee are submitted for filing.					
Please return all corre	spondence concerning this mat	eter to the following:			
Peter T. Gianino					
	Name of Contact Person  Grazi & Gianino, LLP				
	Firm/ Company				
	217 E. Ocean Blvd.				
	Address				
	Stuart, FL 34994				
		City/ State and Zip Code	e		
jcasales@gglawyers.com  E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Peter T. Gianino, Esq.		at (772	286-0200		
Name of Contact Person		Area Code & 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 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

14 JAN 13 AM 11: 15

33 DEGREES, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

33 DEGREES, INC.

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

Corp.," "Inc.," or Co.," or the designation "	word "corporation," "company," or "incorporate Corp," "Inc," or "Co". A professional corporation	
ord "chartered," "professional association," o	r the abbreviation "P.A."	
. Enter new principal office address, if appli	cable:	
rincipal office address <u>MUST BE A STREET</u>	(ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	E BOX)	
		· · · · · · · · · · · · · · · · · · ·
If amonding the recistored agent and/on re-	rintered office address in Elevish and attention	E 41.
	gistered office address in Florida, enter the name o	f the
new registered agent and/or the new regist	ered office address:	f the
new registered agent and/or the new regist		<u>f the</u>
new registered agent and/or the new regist	cred office address:	f the
new registered agent and/or the new regist	ered office address:	f the
new registered agent and/or the new regist	cred office address:	

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	S/T	Jeff Fischer	100 S. Dixie Highway,
Add			Unit 102
Remove			Stuart, FL 34994
2) Change	S/T	Jeff Fisher	100 S. Dixie Highway
Add			Unit 102
Remove			Stuart, FL 34994
3) Change			756.6
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
6) Change			
Add			
Remove			

	(Be specific)
	-
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- 1 M <sub>2</sub> - M <sub>2</sub> - M <sub>2</sub> - M <sub>3</sub>	
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

## APPROVED AND FILED

The date of each amendment(s) adoption	<sub>n:</sub> _January 1, 2014	14 JAN 13	AH11: 15	, if other than the
date this document was signed.		SECRETARY TALL/H/SSE	OF STATE	_
Effective date if applicable:		TALL/H/SSE	ie, tří delőa	
(no more than 90 days after amendment file date)				
Adoption of Amendment(s)	( <u>CHECK ONE</u> )			
The amendment(s) was/were adopted by the shareholders was/were sufficient		of votes east for the	amendment(s)	
The amendment(s) was/were approved must be separately provided for each				
"The number of votes east for the		• •		
by	(voting group)	**		
	(voting group)			
The amendment(s) was/were adopted haction was not required.	by the board of directors without	shareholder action a	nd shareholder	
The amendment(s) was/were adopted baction was not required.	by the incorporators without share	eholder action and sl	nareholder	
Dated/\$	14			
Signature				
(By a director	, president or other officer - if o			
Selected, by a appointed tid	n incorporator – if in the hands uciary by that fiduciary)	of a receiver, trustee,	or other court	
appanies in	nonny vy mai nadomiy,			
Peter T. Gianino, Esq.				
	(Typed or printed n	ame of person signin	g)	
Registered Agent				
<del></del>	(Title of pe	rson signing)	_	_