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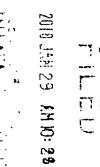
(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	rsiness Entity Nan	ne)
(Dc	ocument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	_ Certificates	s of Status
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JAN 3 0 2018 LALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: Allen Luc DOCUMENT NUMBER: P1300099	as Inc.			
The enclosed Articles of Amendment and fee are submitted	for filing.			
Please return all correspondence concerning this matter to th	ne following:			
<u> </u>	20 LUCAS ne of Contact Person			
Allen	LUCAS Inc			
1000 Westway	Firm/Company SDIVE			
Melbour	Address AL, FL. 3,435 State and Zip Code			
Cherrehond 73@	WWW.Cam utyre annual report notification)			
For further information concerning this matter, please call:				
Allen Lucas Name of Contact Person	at (<u>321</u>), <u>514–9010</u> Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:				
Certificate of Status Cer (Add	3.75 Filing Fee & Certified Copy ditional copy is closed)			
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	·
Allen	WAS TOC
(Name of Corneration as currently	v filed with the Florida Dept. of State)
P130	nn99384
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this lits Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	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 ".	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	V E
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	o o
	<u> </u>
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	
	-
Name of New Registered Agent	
(Florida stre	eet address)
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 w	sith and accept the obligations of the position.
Signature of New R	egistered Agent, if changing

address of each Officer a Attach additional sheets, Please note the officer/dir P = President; V = Vice I Executive Officer; CFO = weld, President, Treasurer Changes should be noted	and/or D if necessa ector title President, Chief F ; Directo in the fol	Director being added: sary) le by the first letter of the office title: t; T = Treasurer; S = Secretary; D = Director; Financial Officer. If an officer/director holds or would be PTD. llowing manner. Currently John Doe is listed worporation, Sally Smith is named the V and S.	TR= Trustee; C = Chairman or Clerk, CEO = Chia more than one title, list the first letter of each offic as the PST and Mike Jones is listed as the V. There These should be noted as John Doe, PT as a Change
X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Check One) Change Add Remove	Title V	Cecilia Luci	Address (S 1000 Westways Drive- Melbourne, Fa., 37935
Change Add Remove	T	Meaghan Lucas	1000 lusturys Drive Melhorne, FC. 3,7935
Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

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.	
hange, reclassification, or cance	dation of issued shares,
endment if not contained in the	amentuseir:
]
	hange, reclassification, or cance

The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after	r amendment file date)
Note: If the date inserted in this block does not meet the applicable statute document's effective date on the Department of State's records.	ory filing requirements, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separately.	
"The number of votes east for the amendment(s) was/were sufficient	for approval
hy	··
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without sha action was not required.	areholder action and shareholder
The amendment(s) was/were adopted by the incorporators without shareho action was not required.	older action and shareholder
Dated1 25/2018	
Signature Allin E. Luca	
(By a director, president or other officer - if director)	
selected, by an incorporator – if in the hands of a appointed fiduciary by that fiduciary)	receiver, trustee, or other court
HILEN LUCUS	
(Typed or printed name of per	rson signing)
<u> President</u>	
(Title of person si	gning)