P14000003189

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: J & S CYPRESS, INC				
DOCUMENT NUMBER:	P1400000318	9		
The enclosed Articles of An				
Please return all corresponde	ence concerning this mat	ter to the following:		
ET	ETHEL CHAVIS			
		Name of Contact Pers	con	
286	625 E HWY 46	Firm/ Company		
so	Address SORRENTO, FL 32776			
		City/ State and Zip Co	ode	
For further information conc	E-mail address: (to be use	·	rt notification)	
ETHEL CHAVIS	· · · · · · · · · · · · · · · · · · ·	at ()	
Name of Cor	ntact Person	Area (Code & Daytime Telephone Number	
Enclosed is a check for the f	ollowing amount made p	ayable to the Florida De	partment of State:	
■ \$35 Filing Fee	3\$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)	
Division o P.O. Box	nt Section of Corporations	Ame Divis Clift 2661	et Address Indirect Section Ission of Corporations Indirect Building Executive Center Circle Issaese, FL 32301	

Articles of Amendment to Articles of Incorporation of

J & S CYPRESS, INC.,

(Name of Corporation as currently filed with the l	Florida Dept. of State)	
P14000003189		
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to	0
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 word "chartered," "professional association," 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>)		1
		ز
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		٠; ن
		; ; ;
	· ·	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	ress in Florida, enter the name of the s:	
Name of New Registered Agent	 	
(Florida st	reet address)	
New Registered Office Address: (City	Florida	
(City,	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar		
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 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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	SHEENA CHAVIS	28625 E HWY 46
Add			SORRENTO, FL 32776
√ Remove			
2) Change	D	SHANE CHAVIS	28625 E HWY 46
Add			SORRENTO, FL 32776
Remove			
3) Change		<u> </u>	
Add			
Remove			
4) Change	*********		
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change		-	
Add			
Remove			

(/	f amending or adding additional Articles. Attach additional sheets, if necessary). (B	de specific)
		
-		
		
	If an amendment provides for an exchang provisions for implementing the amendm (if not applicable, indicate N/A)	ge, reclassification, or cancellation of issued shares, ment if not contained in the amendment itself:
		· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s)	adoption: 05/12/14	, if other than the
date this document was signed.		
Effective date if applicable: 05	5/12/14	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were as by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by	,,	
	(voting group)	
The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated 05/12/	14	
Signature Signature	All Chais	_
•	director, president or other officer - if directors or officers have not been	
	ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	ETHEL CHAVIS	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	