P14000010422

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And 123/14

COVER LETTER

TO: Amendment Section

Division of Corp	porations					
NAME OF CORPO	RATION: Signature	Permitting, Ir	ic.			
DOCUMENT NUM	BER: P140000104	422				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	·			
Please return all corre	espondence concerning this may	tter to the following:				
	Stacy M. Ross	i				
		Name of Contact Person	1			
	Signature Pern	<u>=</u>				
	0000 D 11	Firm/ Company				
	2266 Bridgewo					
	Orlando, Florid	Address a 32818				
		City/ State and Zip Cod	e			
sic	naturenermittin	a@amail.com	า			
918	Signaturepermitting@gmail.com E-mail address: (to be used for future annual report notification)					
For further information	on concerning this matter, pleas	se call:				
Stacy Rossi		at (407_	900-6374 de & Daytime Telephone Number			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment 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		Street Address				
Amendment Section		Amendment Section				
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building				
Tallahassee, FL 32314		2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation \mathbf{of}



Signature Permitting, Inc.

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

P14000010422

mendment(s) to

(Document Number of Corpora	ition (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amend
A. If amending name, enter the new name of the corporation	
name must be distinguishable and contain the word "corp "Corp." "Inc.," or Co.," or the designation "Corp," "Inc, word "chartered," "professional association," or the abbrevic	" or "Co". A professional corporation name must contain
B. Enter new principal office address, if applicable:	2266 Bridgewood Trl
(Principal office address MUST BE A STREET ADDRESS)	Orlando
	Florida 32818
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2266 Bridgewood Trl
many march man to a to	Orlando, FL
	32818
D. If amending the registered agent and/or registered offic	
new registered agent and/or the new registered office at	
Name of New Registered Agent Allison T. Bec	ckford
2266 Bridg	gewood Trail
(Flor	rida street address)
New Registered Office Address: Orlando	, Florida 32818
The state of the s	(City) (Zip Code)
New Registered Agent's Signature, is changing Registered.	Agent:
I hereby accept the appointment as fegistfrey agont. I am tun	niliar with and accept the obligations of the position.
Illisin	That.
Signature of New Regis	wered Agent, if charging

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> <u>Jo</u>	ohn Doe	
X Remove	<u>V</u> <u>M</u>	like Jones	
X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	Allison T. Beckford	2266 Bridgewood Trail
Add			Orlando, Florida
Remove			32818
2) Change	<u>V</u>	Stephanie Reed	11387 Moonshine Crk Cir
Add			Orlando, Florida
Remove			32825
3) Change	VT	Stacy Rossi	2266 Bridgewood Trail
Add			Orlando, Florida
Remove			32818
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti. Attach additional sheets, if necessary).	(Be specific)
f an amendment avoyides for an eych	range, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 cast 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.	
December 15, 2014	
Dated December 13, 2014	
Signature Allesin Sall	
(By a director, president or other officer – it 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)	
Allison T. Beckford	
(Typed or printed name of person signing)	
President	
(Title of person signing)	