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R. WHITE

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Baumann Enterprises INC DOCUMENT NUMBER: P14000016455 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Michael Baumann Name of Contact Person Baumann Enterprise Firm/ Company 1190 Washington Circle Address Homestead,FL 33034 City/ State and Zip Code haelbau@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Michael Baumann Name of Contact Person 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 Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment Articles of Incorporation of

Baumann Enterprise INC

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

P14000016455

(Document Number of Corporation (if known)

nent(s) to

Pursuant to the provisions of section 607.1006, Flits Articles of Incorporation.	lorida Statutes, this <i>Fla</i>	rida Profit Corporation ad	opts the following amenda
A. If amending name, enter the new name of the	he corporation:		
			The ne
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "(word "chartered," "professional association," or	Corp," "Inc," or "Co	". A professional corpora	rated" or the abbreviatic tion name must contain th
B. Enter new principal office address, if application of the principal office address MUST BE A STREET.			

C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	F ROY)		
(114mong man con 11411 DE 11 1 DOL OLI 11CE		· ·	
	•		
D. If amending the registered agent and/or reg	ristanod office address	in Florido anter the nam	a of the
new registered agent and/or the new registe		in Proficia, enter the nam	ie of the
Name of New Registered Agent			
	(Florida street	addinas)	
	(F IOTILIA STEET)	uuuress)	
New Registered Office Address:	(City)	, Florida_	(Zip Code)
	(c.i.y)		(Lip com)
New Registered Agent's Signature, if changing			
hereby accept the appointment as registered age	ent. I am familiar with	and accept the obligations	of the position.
Signature a	of New Registered Age	nt. 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 <math>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>	Address
1) Change	VP	Heidi Baumann	1190 Washington Circle
Add			Homestead,FL 33034
Remove			
2) Change	S	Michael Jones	11625 SW 69th Ct
Add			Miami,Fl 33156
Remove			
3) Change	T	Eric Brown	2500 Parkveiw Dr
Add			Hallandale,FL 33009
Remove			
4) Change			
Add			
Remove			
5) Change			
Add		_	
Remove			
6) Change			
Add			
Remove			-

. If amending or adding additional Art (Attach additional sheets, if necessary).	icles, enter change(s) here: (Re specific)
N/A	(bt specific)
*/^	
	- .
. If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
N/A	
	

The date of each amendment	t(s) adoption: 05/20/2014	, if other than the
date this document was signed	i.	
Effective date if applicable:	05/21/2014	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated_05/2	21/2014	
Signature _	Michael Bauran	_
	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ppointed fiduciary by that fiduciary)	
	Michael Baumann	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	_