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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 18, 2015

CHERYL ANN SANDERS / R & C SANDERS INC 13116 SHERMAN DR HUDSON, FL 34667 US

SUBJECT: R&C SANDERS, INC. Ref. Number: P14000020962

We have received your document for R&C SANDERS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 815A00019696

Carolyn Lewis
Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations

R & C SAND NAME OF CORPORATION:	ERS, INC.	
P1400002962		
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee a	are submitted for filing.	
Please return all correspondence concerning thi	s matter to the following:	
CHERYL ANN SANDERS		
	(Name of Contact Person)	
R & C SANDERS, INC.		
	(Firm/ Company)	
13116 SHERMAN DRIVE		
	(Address)	
HUDSON, FL 34667		
	(City/ State and Zip Code)	
RCSANDERSINC@YAHOO.COM		
E-mail address: (to b	be used for future annual report notification)	
For further information concerning this matter,	please call:	
CHERYL ANN SANDERS 727.233.9923		
(Name of Contact	· · · · · · · · · · · · · · · · · · ·	
Enclosed is a check for the following amount m	nade payable to the Florida Department of State:	
\$35 Filing Fee \$\Bigcup \\$43.75 Filing I Certificate of S	Fee & \$\sumsymbol{\subset}\$\$\$43.75 Filing Fee & \$\sumsymbol{\subset}\$	
Mailing Address	Street Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: R & C SANDERS, INC.					
DOCUMENT NUMBER: P14000020962					
The enclosed Articles of Amendment and fee are sub	mitted for filing.`				
Please return all correspondence concerning this matt	er to the following:				
CHERYL ANN SANDERS					
	Name of Contact Person	l			
R & C SANDERS, INC					
	Firm/ Company				
13116 SHERMAN DRIVE					
	Address				
HUDSON, FL 34667					
	City/ State and Zip Code	;			
RCSANDERSINC@YAHOO.COM	I				
E-mail address: (to be use	ed for future annual report	notification)			
For further information concerning this matter, please call:					
CHERYL ANN SANDERS	at (233-9923			
Name of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for the following amount made po	ayable to the Florida Depa	rtment of State:			
\$35 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



R & C SANDERS, INC.			15 OCT 14	AM II: 04
(Name o	of Corporation as currently	y filed with the Florida De	pt. of State)	
P14000020962			· · · - · · · · · · · · · · · · · · · ·	
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation	adopts the follow	ing amendment(s
A. If amending name, enter the new na	ame of the corporation:			
				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "	Co". A professional corpo		
B. Enter new principal office address,	if applicable:	13116 SHERMAN DRIV	VE	
(Principal office address MUST BE A S		HUDSON, FL 34667		
C. Enter new mailing address, if appli				
(Mailing address <u>MAY BE A POST</u>	<u>OFFICE BOX</u>)	<u></u>		 -
D. If a second is a the consistence of a second and	.d/ou wasintawa d office addu	use in Elevide, enter the ne	omo of the	
 If amending the registered agent an new registered agent and/or the nev 			ine of the	
Name of New Registered Agent	CHERYL ANN SANDERS			
Nume of New Registered Agent	13116 SHERMAN DRIVI	<u> </u>	 	
	(Florida stre	eet address)	₩ ₩	_
V 5 10m 44	HUDSON	,	34667	
New Registered Office Address:		(City)	_, Florida(Zij	p Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist			ons of the position	1
* ************************************		, <u></u>	, ,	
Che	Signature of New R	landers		
	Signature of New R	egistered Agent, if changing	<u> </u>	_

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	PT	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	TRE	BRANDON E. HOLMES	6256 KIMBALL CT
Add			SPRING HILL, FL 34606
X Remove			
2) X Change	D/VP	RANDALL L. SANDERS, JR	13116 SHERMAN DR
Add			HUDSON, FL 34667
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
,	
an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and the amendment itself:

	8/1/2015			if athor than th
The date of each amendment(s) ad	loption:		Circon	if other than th
date this document was signed.		n	Wir Hill	្តី <u>ទី ២ ខេត្ត</u>
Effective date <u>if applicable</u> :		Ĩ		to the state of
	(no more than 90 da	ys after amendment file date,	15 OCT 14	AM 11: 04
Note: If the date inserted in this b document's effective date on the De		e statutory filing requirement	s, this date wil	I not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
The amendment(s) was/were ado by the shareholders was/were su		nber of votes cast for the ame	endment(s)	
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through each voting group entitled to vote			
"The number of votes cast	for the amendment(s) was/were su	fficient for approval		
by		,,,		
	(voting group)			
☐ The amendment(s) was/were add action was not required.			nareholder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without	shareholder action and share	nold er	
Dated 9/	115			
Signature	Quel ann	Sanders	·	
	irector, president or other officer -			
	d, by an incorporator – if in the ha	nds of a receiver, trustee, or o	ther court	
appoint	ted fiduciary by that fiduciary)			
	Cheryl Ann	1 Sanders		
	(Typed or printed nam	e of person signing)		
	President			
	(Title of p	erson signing)		