P14000023680

(R€	equestor's Name)			
(Ad	ldress)			
(Ac	ldress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Bu	usiness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			





500288396815

08/05/16--01018--015 **43.75

SECRETARY OF STATE OPVISION OF CORPORATIONS

AUG 1 5 2016

C LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: <u>STAT E</u>	MH INC		
	BER: 14000023			
	of Amendment and fee are su			
Please return all corres	pondence concerning this ma	tter to the following:	ı	
	HEVILLE AN	19 GRS 0 M Nome of Contact Person		
		Nome of Contact Person	m ·	
•	Firm/ Company			
	6858 NW 7	Address Address	_خ	
	6858 NW 7	33166		
E-mail.address: (to be used for future annual report notification)				
For further information	concerning this matter, pleas	se call:		
NEVILLO .	AMBERSON	ot (561) <u>7/4 - 8 78 4</u> de & Daytime Telephone Number	
Name o	f Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made p	payable to the Florida Depo	ortment 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)	
<u>Mail</u>	ing Adaress	Street	Address	

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Taliahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tollahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

.2016 AUG -5 AM 11: 29 (Name of Corporation as currently filed with the Florida Dept. of State) P14000023680 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: EMH COURIER name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent ana/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida (Citv) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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.

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>	
X Remove	$\underline{\vee}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Ada			
Remove			
2) Change .			
Ado			
Remove			
3) Change			
Add			
,			
Remove			· · · · · · · · · · · · · · · · · · ·
4) Change		_	
Aod			
Remove			
5) Change			
Aad			
Remove			
6 Change			
6) Change			,
Add			
Ramova			

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	<u>e</u> .		
			· 	
				
· · · · · · · · · · · · · · · · · · ·				
		· · · ·		
If an amendment provides for an exchange provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, o ndment if not contained	r cancellation of issuing the amendment is	ed shares, tself:	

The date of each amendment(s) adop	otion: 7/29/2016		if other than the
date this document was signed.	, ,	SECRETARY DIVISION OF CO	OF STATE RPORATION
Effective date if applicable:	(no more than 90 days afti	er amendment file date 2016 AUG - 5	AM 11: 29
Note: If the date inserted in this bloc document's effective date on the Depar		story filing requirements, this date will	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amenament(s) was/were adopte by the shareholders was/were suffic		of votes cast for the amendment(s)	
☐ The amendment(s) was/were approx must be separately provided for each	ved by the shareholders through votin ch voting group entitled to vote separ		
"The number of votes cast for	the amendment(s) was/were sufficien	nt for approval	
by	(voting group)	, , , , , , , , , , , , , , , , , , ,	
☐ The amendment(s) was/were adopte action was not required.			
The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareh	nolder action and shareholder	
Datea <u>7/2</u> Signature	39/2016 35	7	
(By a direc selected, b	ctor, president or other officer — if dir by an incorporator — if in the hands of fiduciary by that fiduciary)		
	EDWARD EDWAR (Typed or printed name of pa	erson signing)	
· 	PRESIDENT (Title of persons		
	(Title of person s	signing)	