(Re	equestor's Name)	1
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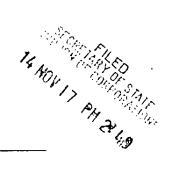
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: TJ HACKETT ENTERPRISES, INC DOCUMENT NUMBER: P14000025300					
The enclosed Articles of	f Amendment and fee are subr	nitted for filing.			
Please return all corresp	ondence concerning this matte	er to the following:			
•	TIMOTHY HACKETT				
;	SAME	Name of Contact Person			
		Firm/ Company			
,	190 SANCHEZ AV	Æ			
-		Address			
<u>(</u>	ORMOND BEACH	l, FL. 32174			
		City/ State and Zip Code			
	E-mail address: (to be used	for future annual report no	tification)		
For further information	concerning this matter, please	call:			
TIMOTHY HACKETT		at (386	235-3077		
Name of Contact Person			& Daytime Telephone Number		
Enclosed is a check for	the following amount made page	yable to the Florida Departr	nent 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)		
Amer Divis P.O. I	ng Address Idment Section Idon of Corporations Box 6327 Inassee, FL 32314	Division of Clifton Bit 2661 Execution Clifton Clifton Bit 2661 Execution Clifton Bit 2661 Execution Clifton Clifton Bit 2661 Execution Clifton	ent Section of Corporations		

Articles of Amendment to Articles of Incorporation of



TJ HACKETT ENTERPRISES, INC

(Name of Corporation as currently filed with the F	lorida Dept. of State)
P14000025300	
(Document Number of Corporation (i	f known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
N/A	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 "	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
Name of New Registered Agent N/A	-
(Florida str	eet address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
l hereby accept the appointment as registered agent. I am familiar v	
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:	DT	Idea Dec	
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)	<u>Title</u>	Name	Address
1) Change	s	JASON HERB	190 SANCHEZ AVE
Add			ORMOND BEACH
Remove			FLORIDA 32174
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
N/A	(
F. If an amendment provides for an exch provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	•
	
	
	<u> </u>

The date of each amendment(s) adoption: NOVEMBER 11, 2014 date this document was signed.	, if other than the
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.	
Dated //////	
Signature Signature	
(By a director, president or other officer - if 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)	
Timothy Hackett	
(Typed or printed name of person signing)	
Dresident	
(Title of person signing)	