

P14000026879

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

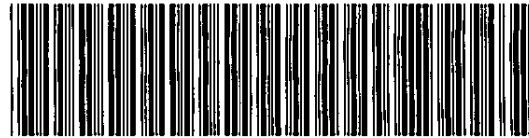
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 JAN 14 PM 1:27
TALLAHASSEE, FLORIDA

Amel

JAN 15 2015

R. WHITE

ATTORNEYS CORPORATION SERVICE, INC.
5668 EAST 61ST STREET
COMMERCE, CA 90040
TEL: (800) 462-5487 ext.133 FAX: (800) 388-0330
EMAIL: ttran@attorneyscorpsservice.com

DOCUMENT FILING REQUEST LETTER

REGULAR FILING SERVICE

DATE: 1/8/15

FROM: Teng Tran

Client Matter:

TO: DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
CLIFTON BUILDING
2661 EXECUTIVE CENTER CIRCLE
TALLAHASSEE, FL 32301

ATTN: DOCUMENT FILING DIVISION

RE: **Premier Working Capital Corporation**

Amendment

Enclosed is one of the following: **(X) ~~Articles of Incorporation~~**

Return request with filing: **(1) Plain Copy**

Return request via following: **(X) Priority Mail/Email**

Total Page(s) attached including transmittal page: ()

****Fax/Email a copy of the filed documents upon acceptance of filing****

****PLEASE RETURN FILED DOCUMENTS ATTACHED WITH AN INVOICE TO:
ATTORNEYS CORPORATION SERVICE, INC.
5668 EAST 61ST STREET, COMMERCE, CA 90040****

****PLEASE CONFIRM UPON RECEIVED DOCUMENTS****

NOTE(S):

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Premier Working Capital Corporation

DOCUMENT NUMBER: P14000026879

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Teng Tran

Name of Contact Person

Rocket Lawyer

Firm/ Company

5668 E 61st St

Address

Commerce CA 90040

City/ State and Zip Code

sweaver@premierworkingcapital.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Teng Tran

Name of Contact Person

at (800) 462-5487 x133

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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

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
of

FILED

15 JAN 14 PM 1:27

PREMIER WORKING CAPITAL CORPORATION

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

ALLAHASSEE, FLORIDA

P14000026879

(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:

The new 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 and/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 _____
(City) (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

Page 2 of 4

(Attach *additional sheets, if necessary*). (Be specific)

[illegible]

(if not applicable, indicate N/A)

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.

Dated 1/8/2015

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)

STEVEN WEAVER

(Typed or printed name of person signing)

Director

(Title of person signing)

Articles of Amendment
to
Articles of Incorporation
of

FILED

PREMIER WORKING CAPITAL CORPORATION

15 JAN 14 PM 1:27

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

P14000026879

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Document Number of Corporation (if known))

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(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

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(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

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Page 2 of 4

[illegible][illegible]

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(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)

STEVEN WEAVER

(Typed or printed name of person signing)

Director

(Title of person signing)