Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323)962-3889

ter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN ROCKET CITY SUPPLY INC.

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107/18/14

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Susan Lewis

(321) 362-5544

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: RO	OCKET CITY SUPPLY INC.
DOCUMENT NUMBER:	P14000027957
The enclosed Articles of Amendmen	of and fee are submitted for filing.
Please return all correspondence con	ecerning this matter to the following:
	Imelda Vasquez
	(Name of Contact Person)
	Legalzoom.com, Inc.
	(Firm/ Company)
	100 W. Broadway Suite 100
	(Address)
	Glendale, CA 91210
For further information concerning to	(City/ State and Zip Code) his matter, please call:
Imelda Vasquez	at (323) 962-8600 x7950
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following	g amount made payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Certificate of	
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

Jul 15 14 09:36p

Susan Lowis

(321) 362-5544

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Articles of Amendment to Articles of Incorporation of

	T CITY SUPPLY INC.	State)
(Name of Corporation as co	urrently filed with the Florida Dept. of S	<u>State</u>)
P	14000027957	
	Number of Corporation (if known)	
suant to the provisions of section 607. lowing amendment(s) to its Articles of In	.1006, Florida Statutes, this Florida Prof acorporation:	fit Corporation adopts
If amending name, enter the new nam	ne of the corporation:	
corporated" or the abbreviation "Corp	e and contain the word "corporation p.," "Inc.," or Co.," or the designation value must contain the word "charter	"Corp." "Inc." or
Enter new principal office address, if incipal office address MUST BE A STR		
	-	······································
Enter new mailing address, if applica (Mailing address <u>MAY BE A POST OF</u>		
If amending the registered agent and/o	or registered office address in Florida, e registered office address:	njer the name of the
If amending the registered agent and/o new registered agent and/or the new r Name of New Registered Agent:	or registered office address in Florida, e egistered office address:	nter the name of the
new registered agent and/or the new r	or registered office address in Florida, e registered office address: (Florida street address)	nier the name of the
new registered agent and/or the new r Name of New Registered Agent:	egistered office address: (Florida street address)	, Florida
new registered agent and/or the new r Name of New Registered Agent:	egistered office address:	
new registered agent and/or the new r Name of New Registered Agent: New Registered Office Address: Registered Agent's Signature, if char	(Florida street address)	, Florida (Zip Code)
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if charactery accept the appointment as register.	(Florida street address) (City)	, Florida (Zip Code)

Jul 15 14 09:36p

Susan Lewis

(321) 362-5544

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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)

Title	Name	Address	Type of Action
ST	Susan S. Lewis	2240 Freedom Avenue Mims, Ft. 32754	Add Remove
<u>TD</u>	SHERA A STANSBERRY	2240 Freedom Avenue Mims, FL 32754	☐ Add ☐ ☐ Remove
SD	BROOKE N STANSBERRY	2240 Freedom Avenue Mims, FL 32754	
E. If amendin (altach addi	ne or adding additional Articles, entitional sheets, if necessary). (Be sp	ter change(s) here: ecific)	
provisions	adment provides for an exchange, as for implementing the amendment applicable, indicate N/A)	reclassification, or cancellation of if not contained in the amendme	issued shares, nt itself:
	applicate, maleure 1771)		

Jul 15 14 09:36p

Susan Lewis

(321) 362-5544 p.10

700
The date of each amendment(s) adoption: 7/2/2014
Effective date if applicable:
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 east for the amendment(s) was/were sufficient for approval
by
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 07/15/2014
Signature Do July - S
(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)
Susan S. Lewis
(Typed or printed name of person signing)
President
(Title of person signing)