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(Re	questor's Name)	
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(Cit	ty/State/Zip/Phone #	<i>f</i>)
PICK-UP	☐ WAIT	MAIL
	isiness Entity Name	<u> </u>
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(Do	ocument Number)	
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JUN 2 0 2018 S. YOUNG IB JUN 19 PH 3:51
SECKETARY OF STATE
ALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fcc & □\$52.50 Filing Fce Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Fl. 32301

	Articles of Am	endment		
·	to Articles of Incor	rporation	L.E)
jorcia CORP	OF P	filed with the Florida	Q60	
(Name of Corporati	On as currently	tiled with the Florida	Dept. of State)	
+ 19 CCC 3	3 OK	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Floric its Articles of Incorporation:		•		ing amendment(s) to
A. If amending name, enter the new name of the c	arporation:			
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association." or the	p, " "Inc," or "Co	o". A professional co		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>2X</u>)	5202 Lehigh	10es	1 3971
D. If amending the registered agent and/or registered new registered agent and/or the new registered Name of New Registered Agent		ss in Florida, enter the	e name of the	
name of the registered tigeth				_
	(Florida stree	t address)		ALCO IS
New Registered Office Address:	(C	Cuy)	, Florida (Zij	p Code A
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.		th and accept the oblig	ations of the position -	ILED 19 PN 3:58 XY OF STATE SEE, FLORIDA

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: X Change	PT	John Doe	2			
X Remove	<u>v</u>	Mike Jon	es			
<u>X</u> Add	<u>\$V</u>	Sally Sm	<u>ith</u>			
Type of Action (Check One)	Title		<u>Namc</u>		Address	
1) Change	0300	<u>.</u>	Eguso,	<u>Salazor</u>	5202	<u>Lees</u>
Add	DI rac'	40(Jehigh	FC
Remove					339	H
2) Change						
Add						
Remove						
3) Change		_				
Add						
Remove						
4) Change						
Add		•			-	
Remove						
5) Change						
Add						
Kemove						
6) Change				· 		-
Add						
Remove						

ttach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)	
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)		
	,	
	,	
	,	
	,	
	,	

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	_
Effective date if applicable: (0-13-3-018	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
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	
(voling 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 (0-18-18)	
Signature	<u> </u>
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator – if in the flunds of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing))
(Typed or printed name of person signing)	
President	
(Title of person signing)	