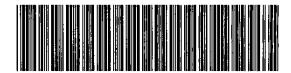
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	: MARY JOHES We
DOCUMENT NUMBER:	P14000034730
The enclosed Articles of Amen	dment and fee are submitted for filing.
Please return all correspondence	e concerning this matter to the following:
	Many Joves Name of Contact Person
	Mary Jones Inc.
	37 Country Club Drive E.
	Destin, FL 3254
Е-п	City/ State and Zip Code Mary-jones Cox.net nail address: (to be used for future annual report notification)
For further information concern	ing this matter, please call:
MARY Jou	at (850) 217-3997
Name of Contact Enclosed is a check for the following	Area Code & Daytime Telephone Number owing amount made payable to the Florida Department of State:
-	43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee ertificate of Status (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status (Certificate Of Status Certificate Of Status Certi
Mailing Add Amendment S Division of C P.O. Box 632 Tallahassee, I	Section Amendment Section orporations Division of Corporations 7 Clifton Building

Articles of Amendment to Articles of Incorporation of

FILLU STORETARY OF STALL MYISION OF COST CHATCH

MARU JONES	i, luc	2017 JAN -9 AM II: 23
(Name of Corporat	ion as currently file	d with the Florida Dept. of State)
P140000	34730	
(Docu	ment Number of Cor	poration (if known)
Pursuant to the provisions of section 607.1006, Floric its Articles of Incorporation:	la Statutes, this <i>Flori</i>	ida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the c	orporation:	
(1)ALNUT GA	loup, Incompo	CATES The new
name must be distinguishable and contain the wo. "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	rd "corporation," ' p," "Inc," or "Co". e abbreviation "P.A.	'company," or "incorporated" or the abbreviation A professional corporation name must contain the "
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD.)		37 Countay Clas Deive E Destin, FL 32541
SAME	<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>)x</u>)	
D. If amending the registered agent and/or registence new registered agent and/or the new registered		n Florida, enter the name of the
Name of New Registered Agent		
	(Florida street ad	
New Registered Office Address:	(City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Agent.	gistered Agent: I am familiar with a	and accept the obligations of the position.
		1
		NA
Sier	nature of New Regist	ered 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	<u>PT</u> <u>Johr</u>	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Richard JONES	37 Country Club Dr
X Add			Destin, Fi 32541
Remove		•	
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	•		
Add		•	
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)	NA	
		<u> </u>	
			
	<u> </u>		-
			·
			
	· · · · · · · · · · · · · · · · · · ·		
			
an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or ndment if not contained i	in the amendment itself:	A)/A
(if not applicable, indicate N/A)			٠١٠٠
			
			

The date of each amendment(s) adoption:	1/1/2017	, if other than the
date this document was signed	1/1/2017	FILLE SCORETARY OF JULY 1 EVISION OF CORECRATOR
	e than Of days after amendment file date)	2017 JAN -9 AMII: 23
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's rec	e applicable statutory filing requirements, this	
Adoption of Amendment(s) (CHECK ON	<u>E</u>)	
☐ The amendment(s) was/were adopted by the shareholde by the shareholders was/were sufficient for approval.	ers. The number of votes cast for the amendme	ent(s)
☐ The amendment(s) was/were approved by the sharehold must be separately provided for each voting group entities.	ders through voting groups. The following statitled to vote separately on the amendment(s):	ement
"The number of votes cast for the amendment(s) v	was/were sufficient for approval	
by		
(voting group)		
 The amendment(s) was/were adopted by the board of diaction was not required. The amendment(s) was/were adopted by the incorporate 		
action was not required.		
Dated		
Signature Mary pres		
(By a director resident or oth	ner officer – if directors or officers have not be if in the hands of a receiver, trustee, or other of duciary)	
MA	orined name of person signing)	
(Typed or p	printed name of person signing)	
Pu Pu	esioea+	
	(Title of person signing)	•