P14000035643

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	<u> </u>
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
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MAY 1 9 2017 T. LEMIEUX



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: KR	odz, Inc.		
DOCUMENT NUMBI	01	1000035643	ten servisidadas en elemente de la companya della companya de la companya della c	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
-	Chen	Name of Contact Person	-	
KRodz, Inc.				
150 Courley Drive SE. Address				
Port Charlotte R. 33952 City/ State and Zip Code				
,		City/ State and Zip Code 1 1 1 1 2 1 2 1 2 2 2 2 2 2 2 2 2 2 2		
For further information concerning this matter, please call:				
Chery 1 M. Whates at (941.) 979.7980 Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
S35 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)	
Maill		Street	A d.J	

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

F	133	1	***	
-	•	-	C Labor	***

	of	TE E E E E E E
	KROdz, Inc.	2017 MAY 15 P 3: 5H
(Name of Corpo	oration as currently filed wit	
	P1400003564	SCORETARY OF STATE JALLAHASSEE, EL GOIGA
(D	ocument Number of Corporati	
ursuant to the provisions of section 607.1006, Fl a Articles of Incorporation:	lorida Statutes, this <i>Florida Pr</i>	rofit Corporation adopts the following amendment(
. If amending name, enter the new name of t	he corporation:	
Island	Dreams Mara	sement Inc. The new
ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "(ord "chartered," "professional association," or	Corp," "Inc," or "Co". A p	The new pany," or "incorporated" or the abbreviation rosessional corporation name must contain the
. Enter new principal office address, if applic	cable:	n/a
Principal office address <u>MUST BE A STREET</u>		
		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	F ROX)	nla
(Mussing auto-155 MATT BE TEXT OFF OF FILE		
		
If amending the registered agent and/or reg		rida, enter the name of the
new registered agent and/or the new register	erea office address:	
Name of New Registered Agent	n/a	
	(Florida street address))
	· ·	
New Registered Office Address:	(City)	, Florida
	(Cily)	(Lip Coulc)
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing	Registered Agent	
nereby accept the appointment as registered age		ccept the obligations of the position.
, , , , , , , , , , , , , , , , , , , ,	•	
	nla	
	Signature of New Registered A	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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change		N/A	
Add			
Remove			
2) Change		N/A	
Add			
Remove			
3) Change		N/A	
Add			\$49\$\$4
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
Add			
Remove			

	adding additional Articles, enter change(s) here: al sheets, if necessary). (Be specific)
Please	change corporation purpose to:
	any and all lawful business.
rovisions for	ent provides for an exchange, reclassification, or cancellation of issued shares, implementing the amendment if not contained in the amendment itself: indicate N/A
	N/A

The date of each amendment(s) adoption:	May 11, 2017	, if other than the
date this document was signed.	•	
Effective date <u>if applicable</u> :	May 11,2017	· · ·
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does n document's effective date on the Department of	not meet the applicable statutory filing requirements, f State's records.	, this date will not be listed as the
Adoption of Amendment(s) (CH	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The number of votes cast for the amer approval.	ndment(s)
	ne shareholders through voting groups. The following group entitled to vote separately on the amendment	
"The number of votes cast for the amer	ndment(s) was/were sufficient for approval	
by(voi		
(vol	ting group)	
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder	areholder
The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder	older
Dated May	11,2017	
Signature	ext M whallon President	
	sided or other officer — if directors or officers have no orporator — if in the hands of a receiver, trustee, or of y by that fiduciary)	
	Cheryl M. Whalley (Typed or printed name of person signing)	
	President	

(Title of person signing)