

P14000039685

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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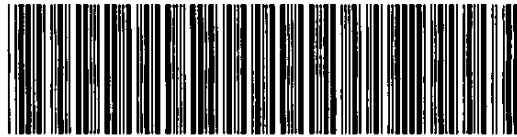
(Business Entity Name)

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14 JUN -6 PM 4:16  
SECRETARY OF STATE  
FALLASSISTED

APPROVED  
AND  
FILED

C. LEWIS  
JUN 18 2014  
EXAMINER

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** MILLENNIUM SOCIAL SYSTEMS  
**DOCUMENT NUMBER:** P14000039685

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

Please return all correspondence concerning this matter to the following:

EDNA TAYLOR  
Name of Contact Person  
MILLENNIUM SOCIAL SYSTEMS  
Firm/ Company  
1411 E. OAKFIELD DRIVE  
Address  
BRANDON, FL. 33511  
City/ State and Zip Code

EDNA.TAYLOR@BAYSPRINGINC.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EDNA TAYLOR at ( 813 ) 650-6753  
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:

- |                                                     |                                                                        |                                                                                                     |                                                                                                                            |
|-----------------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>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

APPROVED  
AND  
FILED

Articles of Amendment  
to  
Articles of Incorporation  
of

14 JUN -6 PM 4: 17

MILLENNIUM SOCIAL SYSTEMS, INC.

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P14000039685

(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:

*N/A* 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."

*N/A* B. Enter new principal office address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

*N/A* C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

*N/A* 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)

*N/A* 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

**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

X Remove                    V        Mike Jones

X Add                         SV       Sally Smith

| Type of Action<br>(Check One)                                                                                    | Title      | Name                 | Address                                                             |
|------------------------------------------------------------------------------------------------------------------|------------|----------------------|---------------------------------------------------------------------|
| 1) <input checked="" type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>CEO</u> | <u>DAMION BUTLER</u> | <u>8305 N. RIVER OAKS CT.</u><br><u>Tampa, FL 33617</u>             |
| 2) <input checked="" type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>P</u>   | <u>EDNA TAYLOR</u>   | <u>4716 E. CURTIS ST.</u><br><u>TAMPA FL 33610</u>                  |
| 3) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>VP</u>  | <u>Damion Butler</u> | <u>8305 N. River</u><br><u>Oaks Court</u><br><u>Tampa, FL 33617</u> |
| 4) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove            | _____      | _____                | _____                                                               |
| 5) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove            | _____      | _____                | _____                                                               |
| 6) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove            | _____      | _____                | _____                                                               |

**E. If amending or adding additional Articles, enter change(s) here:**

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

CURRENTLY EDNA TAYLOR IS LISTED AS THE CEO P  
AND DAMION BUTLER IS LISTED AS THE V. THERE IS  
A CHANGE. DAMION BUTLER LEAVES HIS POSITION AS THE  
V AND ASSUMES THE CEO. EDNA TAYLOR LEAVES HER  
CEO POSITION.

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,  
provisions for implementing the amendment if not contained in the amendment itself:**

(if not applicable, indicate N/A)

N/A

APPROVED  
AND  
FILED

The date of each amendment(s) adoption: 14 JUN -6 PM 4:17, if other than the date this document was signed.

Effective date if applicable: 6/1/14 SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
(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 6/1/14

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)

GARFIELD JACKSON

(Typed or printed name of person signing)

VICE PRESIDENT

(Title of person signing)