P14000047749

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: KUTCHEY'S FLOWERS IN KEY WEST, INC.					
DOCUMENT NUMBER: P14000047749					
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.			
Please return all corn	respondence concerning this ma	tter to the following:			
	DEBRA RAINER				
	Name of Contact Person				
Firm/ Company					
185 SOUTH POINT DRIVE					
Address					
SUGARLOAF, FLORIDA 33042					
City/ State and Zip Code					
DLG152@AOL.COM					
	E-mail address: (to be us	sed for future annual report	notification)		
For further information concerning this matter, please call:					
DEBRA RAINER		at (305	587-3598		
Name of Contact Person Area Code & Daytime Telepho			de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
■ \$35 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)		

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 of



(<u>Name o</u> UTCHEY'S FLOWERS IN KEY WES	f Corporation as currently	iled with the Florida Der	ot. of State MAH 27 D
UTCHEY'S FLOWERS IN KEY WES'			· ·
	Γ, INC.		SECRETARY
	(Document Number of C	orporation (if known)	TALLAHASSEE, ELO
ersuant to the provisions of section 607. Articles of Incorporation:	1006, Florida Statutes, this FI	orida Profit Corporation a	adopts the following amendment
If amending name, enter the new na	me of the corporation:		
me must be distinguishable and cont orp.," "Inc.," or Co.," or the designo rd "chartered," "professional associat	ation "Corp," "Inc," or "Co	". A professional corpor	
Enter new principal office address, i incipal office address MUST BE A ST			
Enter new mailing address, if applie (Mailing address MAY BE A POST C	OFFICE BOX) Nor registered office addres	s in Florida, enter the na	me of the
namenanty the registered agent and	recoistance office address.		
new registered agent and/or the new			
new registered agent and/or the new Name of New Registered Agent	DEBRA RAINER		
new registered agent and/or the new	DEBRA RAINER 185 SOUTH POINT DRIVE	······································	
new registered agent and/or the new Name of New Registered Agent	DEBRA RAINER 185 SOUTH POINT DRIVE (Florida street	······································	
new registered agent and/or the new Name of New Registered Agent	DEBRA RAINER 185 SOUTH POINT DRIVE (Florida street SUGARLOAF	······································	_, Florida 33042

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)

Example:

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.

X Change	PT	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	SEC	MARGARET KUTCHEY BERNS	1223 WHITE STREET
X Add			KEY WEST, FL 33040
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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an amendment provides for an exchan provisions for implementing the amend	<u>te, reclassification, or c</u> sent if not contained in	the amendment itself	<u>snares,</u> f·	
(if not applicable, indicate N/A)	THE THE CONTRACTOR IN	the antendament reser	<u></u>	
		-		
		····		
	 			
				<u>.</u>

,	MARCH 17, 2017	
	doption:	_, if other than the
date this document was signed.		
Effective date if applicable:		
mappineadic.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the De	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement 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	
bv	(voting group)	
- /	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	,
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
MARCH 1	17, 2017	
Dated		_
0: 1		
Signature (By a c	lirector, president or other officer – if directors or officers have not been	_
selecte	d, by an incorporator – if in the hands of a receiver, trustee, or other court sted fiduciary by that fiduciary)	
	PAM KUTCHEY	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	