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JUN 29 2015

C LEWIS

## **COVER LETTER**

TO: Amendment Section Division of Corporations JIIIUG OF JAX CORP 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: TUTTUG OF ZAK CORP E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy

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

(Additional Copy

is enclosed)

## Articles of Amendment to Articles of Incorporation

FILED SEGRETARY OF STATE DIVISION OF CORPORATIONS

SOOD PATUTIONS OF JAX CORP

15 JUN 18 AM 9: 30

poration as currently filed with the Florida Dept. of State) (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: A. If amending name, enter the new name of the corporation: 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." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: (City) (Zip Code) 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	. <u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
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ttach additional sheets, if necessary).	(Be specific)				
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an amendment provides for an excharge rovisions for implementing the amer	ange, reclassifica idment if not cor	<u>ition, or cancella</u> ntained in the an	<u>tion of issued</u> endment itse	<u>shares,</u> lf:	
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(if not applicable, indicate N/A)					
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(if not applicable, indicate N/A)					
(if not applicable, indicate N/A)					

The date of each amendment(s) adoptio	on:	FILE, if	other than the
date this document was signed.		SECRETARY OF STA	Tions
Effective date if applicable:			
	(no more than 90 days aft	er amendment file dates JUN 18 AH 9:	30
Note: If the date inserted in this block of document's effective date on the Departm		ntory filing requirements, this date will not be	e listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient		of votes cast for the amendment(s)	
☐ The amendment(s) was/were approved must be separately provided for each	by the shareholders through votin voting group entitled to vote separate	ng groups. The following statement rately on the amendment(s):	
"The number of votes east for the	e amendment(s) was/were sufficie	nt for approval	
by		9	
	(voting group)	-	
The amendment(s) was/were adopted by action was not required.	by the board of directors without s	hareholder action and shareholder	
☐ The amendment(s) was/were adopted baction was not required.	by the incorporators without share	holder action and shareholder	
Dated 06	14/2015		
Signature 🛪	WRB.		
	r. president of other officer - if di		
	an incorporator – if in the hands of luciary by that fiduciary)	f a receiver, trustee, or other court	
	EVER GOVE	2 PEREZ	
	(Typed or printed name of p	erson signing)	
·	PRESIDENT	- Owver	
	(Title of person	signing)	