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14 AUG 18 PM 2: 12
SECRETARY OF STATE
TALLAHASSEE, FLORID.

APPROVED

T. LEMIEUX

COVER LETTER

TO:	Amendment Section
	Division of Corporations

NAME OF CORPO	RATION: HIGHSIDE	E SALES INC.		
	BER: P140000560			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	DARIN EDWAF	RDS		
	_	Name of Contact Person	1	
	HIGHSIDE SAL	ES INC.		
		Firm/ Company		
	4420 US HWY	27 SOUTH		
		Address		
	SEBRING, FL 3	3870		
		City/ State and Zip Cod	2	
mie	chaelq5@live.co	m		
	•	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
DARIN EDV	WARDS	at (863	, 471-9906	
Name	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	urtment 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)	
<u>Mai</u>	iling Address	Street	Address	
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		
			issee, FL 32301	

Articles of Amendment to Articles of Incorporation of

	of	
HIGHSIDE SALES INC.		
(Name of Corporation as curre	ently filed with the Florida Dept. of State)	
P14000056094		
(Document Nun	nber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Florida Profit Corporation a	dopts the following amendment(s) t
A. If amending name, enter the new name of	f the corporation:	
		The new
	he word "corporation," "company," or "incorp "Corp," "Inc," or "Co". A professional corpor or the abbreviation "P.A."	
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)		
 If amending the registered agent and/or r new registered agent and/or the new registered 	registered office address in Florida, enter the nate stered office address:	me of the
Name of New Registered Agent		-
	(Florida street address)	-
New Registered Office Address:	, Florida	
	(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

14 AUG 18 PH 2: 12
SECRETARY OF STATE
TALLAHASSEE, FLORID.

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	<u>PT</u> <u>J</u>	<u>Iohn Doe</u>	
X Remove	<u>v</u> !	Mike Jones	
X Add	<u>sv</u> s	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP	ROBERT S WIGINS	4420 US HWY 27 SOUTH
Add		•	SEBRING FL 33870
Remove			
2) Change	TREA	KENNETH EDWARDS	4420 US HWY 27 SOUTH
Add			SEBRING, FL 33870
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		***	
Add			
Remove			
6) Change			
Add			
Remove			

The date of each amendment(s) adoption: AUGUST 12, 2014	, if other than the
date this document was signed.	
Effective date if applicable: AUGUST 12, 2014	
(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 HIGHSIDE SALES INC.	
(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 AUGUST 12 2014	
Signature Jan 2	
(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)	
DARIN EDWARDS	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	