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(Re	equestor's Name)			
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Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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R. WHITE

COVER LETTER

Division of Corporations NAME OF CORPORATION: HRP MURPHY, INC. DOCUMENT NUMBER: P14000062505 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: WESLEY M. GRAYBILL Name of Contact Person GRAYBILL LANSCHE & VINZANI, LLC Firm/ Company 2721 DEVINE ST. Address COLUMBIA, SC 29205 City/ State and Zip Code brian@huntretailonline.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Wesley M. Graybill at (803 404-5703 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: □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ■\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address

TO: Amendment Section

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

FILED

to Articles of Incorporation

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	s currently filed with the	Florida Dept. of State	
4000062505		- 6,	
(Docume	nt Number of Corporation	(if known)	
suant to the provisions of section 607 Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporation adopts the follow	ving amendmet
If amending name, enter the new n	ame of the corporation:		en.
ne must be distinguishable and con	nation "Corp," "Inc," or	ion," "company," or "incorporated" or the "Co". A professional corporation name must "P.A."	
Enter new principal office address, if applicable:		N/A	
incipal office address <u>MUST BE A S</u>		**************************************	
			_
Enter new mailing address, if applications and address MAY BE A POST		N/A	- -
			_
		iress in Florida, enter the name of the	
new registered agent and/or the nev		<u> </u>	
Name of New Registered Agent	N/A		
	(Florida si	treet address)	
,	(1 101 100 01		
New Registered Office Address:	N/A	, Florida	

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 Do	<u>De</u>	
X Remove	<u>v</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally St	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change	VP	_	MARVIN CURTIS	
Add				
Remove				
2) Change	VP	_	MARY RUTH CURTIS	
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) L Change		-		
Add				
Remove				

E. <u>If an</u>	nending or adding additional Artic ch additional sheets, if necessary).	cles, enter char	nge(s) here:			
N/A	ch uaanonai sneem, y necessaryy.	(De specific)				
IVA						
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		<u></u>		· ·		
'. <u>If an</u> pro	amendment provides for an excha visions for implementing the amen	ange, reclassifi Idment if not c	cation, or cand ontained in the	<u>cellation of iss</u> e amendment i	<u>ued shares.</u> itself:	
	(if not applicable, indicate N/A)					
N/A						
						
						
						

The date of each amendment	(s) adoption: N/A	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	N/A	<u>—</u>
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d 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 action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder	
NOV	EMBER 20, 2014	
Dated Signature	Ma hul	
(B ₁	y a director, president of other officer - if directors or officers have not been	_
	ected, by an incorporator – if in the hands of a receiver, trustee, or other court	
ар	pointed fiduciary by that fiduciary)	
	Ted Hunt	
	(Typed or printed name of person signing)	_
	President	
	(Title of person signing)	