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JUL 1 8 2017 S. YOUNG



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: TPS OF HOMESTI	EAD, INC.		
DOCUMENT NUMB	ER: P14000075265			
	f Amendment and fee are sub	omitted for filing.		
Please return all corresp	ondence concerning this mat	ter to the following:		
I	PATRICK R. MELVIN			
-		Name of Contact Person		
-		Firm/ Company		
	19970 SW 264 STREET			
-	-	Address		
1	HOMESTEAD, FL 33030-38	43		
-		City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
RMEL	VIN1977@GMAIL.COM			
-	E-mail address: (to be us	ed for future annual report	notification)	
For further information	concerning this matter, pleas	e call:		
PATRICK R. MELVII	٧	at (<u>305</u>	216-6362 de & Daytime Telephone Number	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	riment of State:	
S35 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

(Name of Cor	poration as currently	filed with the Florida Dept. of State)				
P14000075265						
(Document Number of	Corporation (if known)				
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this I	Florida Profit Corporation adopts the foll	owing amen	dment	t(s) to	
A. If amending name, enter the new name of	the corporation:					
			The	new		
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "C	Co". A professional corporation name i	he abbrevio nust contain	ttion 1 the		
R. Enter new principal office address if ann	dieable:	19970 SW 264 STREET				
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		HOMESTEAD, FL 33030-3843				
C. Enter new mailing address, if applicable		19970 SW 264 STREET		<u> </u>		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		HOMESTEAD, FL 33030-3843	<u>~</u>	17		
			2.5	 ناخ	;	
D. If amending the registered agent and/or new registered agent and/or the new regi	registered office addr stered office address:	ess in Florida, enter the name of the		 	-	
	RICK R. MELVIN		<u>;;;</u> ;;,	## မှာ	٠ _ ٠	
	0 SW 264 STREET			CD CD		
	(Florida str	eet address)				
New Registered Office Address:	HOMESTEAD, F		orida			
	(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.

X Change	<u>10</u>	ohn Doe	
X Remove	<u>V</u> <u>N</u>	<u>like Joneş</u>	
X Add	<u>sv</u> <u>s</u>	ally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	RICK MCKEE	20145 SW 264 STREET
Add	 _		HOMESTEAD, FL 33031
X Remove			
2) Change	P	PATRICK R. MELVIN	19970 SW 264 STREET
X Add			HOMESTEAD, FL 33030-3843
Remove			
3) Change			
Add			
Remove			
4) Change			
Add		·	
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional she	ng additional Articets, if necessary).	(Be specific)	izeta) nei e			
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lf an amendment pr	ovides for an exch	iange, reclassif	<u>ication, or can</u>	cellation of iss	ued shares,	
provisions for impl	ementing the ame le, indicate N/A)	<u>ndment if not c</u>	ontained in th	<u>e amendment</u>	<u>itself:</u>	
(у погаррисат	ie, inaicaie N/A)					
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01/01/2017
The date of each amendment(s) adoption:, if other than the date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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.
06/30/2017
Dated
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)
Fich Mchoo
(Typed or printed name of person signing)
1 sesia en l
(Title of person signing)