## 80108000119

(Req	uestor's Name)		
(Add	ress)		
(Add	ress)		
(City	/State/Zip/Phone	<del>:</del> #)	
PICK-UP	☐ WAIT	MAIL	
(Bus	iness Entity Nam	ne)	
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to F	iling Officer:		

Office Use Only



400322078434

12/28/18--01021--011 \*\*52.50



C GOLDEN

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: JS #1 INVESTMENT INC					
DOCUMENT NUMBER: P14000080108					
The enclosed Articles of	Amendment and fee are sul	bmitted for filing.			
Please return all correspo	ondence concerning this mat	ter to the following:			
Tı	ricia Shotzberger				
		Name of Contact Person			
Ti	Tricia Shotzberger PA				
_		Firm/ Company			
36	3690 W Gandy Blvd				
_	Address				
T:	Tampa, FL 33611				
		City/ State and Zip Code			
tshotzy(	@outlook.com				
	-	ed for future annual report r	notification)		
			,		
For further information c	oncerning this matter, pleas	e call:			
Tricia Shotzberger		813 at (	857-6320		
Name of	Contact Person		e & 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)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ameno Divisio P.O. B	ng Address Iment Section on of Corporations ox 6327 assee, FL 32314	Division Clifton I 2661 Ex	Address nent Section of Corporations Building ecutive Center Circle see, FL 32301		

## Articles of Amendment to Articles of Incorporation of

FILED

JS #1 INVESTMENT INC	2018 DEC 28 PM 1: 43
(Name of Corporation P14000080108	as currently filed with the Florida Dept. of State)
	HASSEE, FL
(Documen	t Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporate	oration:
N/A	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A."
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRE	<u>ESS</u> )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered	
new registered agent and/or the new registered off	ice address:
Name of New Registered Agent N/A	
	(Florida street address)
New Registered Office Address:	, Florida
new negistered Office nauress.	(City) (Zip Code)
New Registered Agent's Signature, if changing Register	ered Agent:
t nereby accept the appointment as registered agent. Tak	m familiar with and accept the obligations of the position.
Signatu	re 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	PT	John Doe	
X Remove	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Т	Tricia Shotzberger, PA	1449 W BUSH BLVD
Add X Remove			TAMPA, FL 33612
2) Change	<del></del>		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
11/74
<del></del>
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
Cancellation/Buyout of 30% Shares of Tricia Shotzberger, PA
- Cancernation Day on area of Tricia Shorzberger, 174

, 4 °	12/20/18	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
•	/20/18	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more man 90 aays ajter amenament jue aate)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendments sufficient for approval.	(s)
	pproved by the shareholders through voting groups. The following statem or each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and sharehold	er
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
12/20/18 Dated		
Signature	1) ur D	
(By a selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	
	Tricia Shotzberger, PA	
	(Typed or printed name of person signing)	
	Treasurer	
	(Title of person signing)	