Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H140002461793)))



H140002461793ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : EXPRESS CORPORATE FILING SERVICE IN

Account Number : I20000000146

Phone : (305)444-4994

Fax Number : (305)444-4977

**Enter the email address for this business entity to be used for further annual report mailings. Enter only one email address please.

mail Address:		
mall Address:		

COR AMND/RESTATE/CORRECT OR O/D RESIGN ANMASOFI, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

RECEIVED

Electronic Filing Menu

Corporate Filing Menu

Help 19/14

FILED

Articles of Amendment

Articles of Incorporation 914 OCT 21 AM 10: 51 CRETAIN OF STATE ANMASOFI, INC. LAHASSEE, FLORIDA (Name of Corporation as currently filed with the Florida Dect. of State) P14000080168 (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: The new 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) Florida 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

____Add

6) ____ Change

__ Remove

address of each Office (Attach additional shee Please note the afficer, P = President; V = Vic Executive Officer; CF held. President, Treast Changes should be not a change, Mike Jones	er and/or I ets, if neces /director til ce Presiden O = Chief wer, Direct ted in the fo	Director being added: sary) lie by the first letter of the offic it; T= Trecsurer; S= Secretar Financial Officer. If an offic for would be PTD. ollowing manner. Currently J	e title; y; D= Director; TR= 1 ar/director holds more oim Doo is listed as the	Trustee: C = Chairman or Clerk: CEO = Chic than one tille, list the first letter of each offic PST and Mike Jones is listed as the V. There is should be noted as John Doe, PT as a Change
X.Change	PT	John Doc		
X Remove,	<u>v</u>	Mike Jones	•	
X Add	<u>vz</u>	Sally Smith		
Type of Action (Check One)	Title	Namo		<u>Addres</u> s
1) Change	76	POURC	K, Barraga	873 SW 43.5
Add				mome EL 3316
X Remove			•	
2) Change		<u></u>		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change	.		*****	
Add				
Remove				
c) Oh				•

•	(Be specific)
	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·
	*
A	
I an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, nament if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ango, reclassification, or cancellation of issued shares, nament if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	
f an amendment provides for an exch provisions for implementing the ames (if not applicable, indicate N/A)	ango, reclassification, or cancellation of issued shares, nument if not contained in the amendment itself:
I an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	
I an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	

The date of each amendment(s) a	loption: 10 20 2014	
Effective date if applicable:		
	(no more than 90 days after amendment	file date)
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	pied by the shareholders. The number of votes cast fo. Riciant for approval.	the amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The each voting group entitled to vote separately on the at	following statement nendment(s):
"The number of votes cast	for the amendment(e) was/wore sufficient for approval	
Ъу		13
	(voling group)	
action was not required.	pted by the board of directors without shareholder action as the incorporators without shareholder action as	
Dated	10/20/2014	
Signature	all >	
(By a di selector	rector, president or other officer – if directors or office l, by an incorporator – if in the hands of a receiver, trus ed fictuciary by that fiduciary)	
	Con sol Con ora . (Typed or printed name of person signing)	·
	fraten or frances mente or beason sikiring)	
,	PRESTDENT	•
	(Title of person signing)	