

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.

(((H18000289228 3)))



H180002892283ABC7

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 : JOHN M WICKER PA Account Number : T20070000104

Phone : (239) 939-2222

Fax Number : (239) 939-2280

S TALLENT

OCT 0 5 2018

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

Email Address: MWickera lawcrw. Com

18 001 - 4 PR 1: 30

COR AMND/RESTATE/CORRECT OR O/D RESIGN TOO LAZY TO FAIL, INC.

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

Querd

14 180002892 283

Electronic Filing Menu

Corporate Filing Menu

Help

H180002892283

Articles of Amendment to Articles of Incorporation of

TOO LAZY TO FAIL, INC.	cently filed with the Florida Dept. of State)	
(Name of Corporation as eut)	THE TOTAL CITY AND AND ADDRESS OF THE PARTY	
P14000084361		
· · · · · · · · · · · · · · · · · · ·	oct of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amer	ndment(s) to
A. If amending name, enter the new name of the corporation	<u>n:</u>	
A. It amending	_	new
name must be distinguishable and contain the word "corporation"," "Inc.," or Co.," or the designation "Corp.," "Inc.," word "chartered," "professional association," or the abbreviate	or Co . A projessimal comment	ation in the
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		8
	<u> </u>	<u> </u>
C. Enter new mailing address, if applicable:	S S S S S S S S S S S S S S S S S S S	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		<u>-</u>
	اران المنظم المنظم المنظم المنظم المنظ	
		-
	<u> </u>	₹
D. If amending the registered agent and/or registered office	e address in Florida, enter the name of the	GEO
new registered agent and/or the new registered office ad	idress:	
Name of New Registered Agent		
	ridu street address)	
trior	riab sirver addressy	
Now Registered Office Address:	Florida Florida	
	(City) (21p Code)	•
New Registered Agent's Signature, if changing Registered a I hereby accept the appointment as registered agent. I am fan	Agent: miliar with and accept the obligations of the position.	
I hereby accept the appointment as registered agent. I am juit	The state of the s	
Signature of	New Registered Agent, if changing	
<u>-</u>		
H 180	002892 783	

H 180002892283

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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	STD	STEVE ROCKEY	
Add X Remove			
	D	SCARLETT ROCKEY	6055 EVERETT STREET
2) Change Add			NAPLES, FL 34112
Remove 3) X Change	DPST	EDWARD WILLIAMS	350 LITH STREET NW
Add			NAPLES, FL 34120
Remove			
4) Change			
Add Remove			
5) Change			
Add			
Rcmove			
6) Change			
Add			

H18000 2892283

H 180002892283

	onal sheets, if		1-0-A						
								_	
									_
					<u></u>				
									<u> </u>
<u>, </u>									
									
									_
									
_									_
	-								
						_	_		
									-
		_							
									
	dment provi			aalaesitica	tion AT F	ncellation	of issued sh	ares,	
If an amen	dment provi for implem	<u>des for an e</u> eating the s	<u>icoange, ri</u> mendment	if not cor	itained in	the amend	nent itself;	···	
if not	applicable, i	ndicate N/A)						
/A	• •								
<u> </u>								-	
								<u> </u>	
						<u>,</u> -			-
				_					
			_		_				

H 180002892283 _, if other than the The date of each amendment(s) adoption: ___ 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. (CHECK ONE) Adoption of Amendment(s) 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 east for the amendment(s) was/were sufficient for approval (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. Signature 100 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) **EDWARD WILLIAMS**

H 180002892 283

(Typed or printed name of person signing)

(Title of person signing)

PRESIDENT