## PH000085851

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## COVER LETTER

T0: Amendment Section
Division of Corporations

NAME OF CORPORATION	S. Shaw Enter	rorises. Inc.			AEC SEC
		<u></u>		<u> </u>	—37 781 27 181
DOCUMENT NUMBER: P1	400000001				<b>一分</b> 計
The enclosed Articles of Ameri	dment and fee are su	ibmitted for filing.			
Please return all correspondence	e concerning this ma	tter to the following:			31810 21811 21818
Barb N	/IcBride				3>
		Name of Contact Pe	erson	S.	
South	Beach Tax & Fir	nancial Services			
		Firm/ Company	У		
320 Os	sceola Avenue				
		Address		,	
Jackso	nville Beach, F	L 32250			
		City/ State and Zip	Code		
	arts@gmail.com	l sed for future annual re		otification)	<u>.                                    </u>
11-21	ian address. (to be us	sed for future annual re	port n	ottication)	
For further information concern	ning this matter, pleas	se call:			
	3				
Barb McBride		<sub>at (</sub> 904		241-2533	
Name of Contac	t Person	Area	a Code	& Daytime Telephone N	lumber
Enclosed is a check for the follo	owing amount made	payable to the Florida I	Depart	ment of State:	
	43.75 Filing Fee & ertificate 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 Add				ddress	
Amendment Section Division of Corporations				nent Section	
P.O. Box 632	•			of Corporations Building	
Tallahassee, FL 32314 2661 Executive Center		_			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

S. Shaw Enterprises, Inc.			بار باروت الاست المست	TO
(Name of Corporation as currently filed	with the Flor	ida Dept. of State)	101 101	- 6 (mg)
P14000085851			Ag.	P
(Document Number of Co	rporation (if k	nown)	ى ئى 50	<i>\text{in}</i>
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	atutes, this Flo	orida Profit Corporation adopts	the following	्रे अ g amendment(s) to
A. If amending name, enter the new name of the corpo	oration:			
Samuel Shaw Enterprises, Inc.				The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional Association," or the abb	"Inc," or "Co	". A professional corporation		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS)			-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered	offing addrose	N/A	tho	- - -
new registered agent and/or the new registered offi		s in 1 lotida, enter the hame of	1116	
Name of New Registered Agent	N/A			
	•			
	(Florida street	address)		
New Registered Office Address:	(City)	, Florida	Zip Code)	-
New Registered Agent's Signature, if changing Registe	ered Agent:			
I hereby accept the appointment as registered agent. I as	m familiar witi	h and accept the obligations of t	he position.	
Signature of New I	N/A	ant if changing		
Signature of New I	n <i>egisterea Agt</i>	ant, n vnanging		

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>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<del> </del>	N/A	
Add		·	
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Add			
Remove			

If amending or add	ing additional Articles, enter change(s) here: eets, if necessary). (Be specific)
Audin addinonai sii	
	N/A
	•
. <u></u>	
	<u> </u>
·	
	——————————————————————————————————————
If an amendment p	rovides for an exchange, reclassification, or cancellation of issued shares, lementing the amendment if not contained in the amendment itself:
provisions for imp	lementing the amendment if not contained in the amendment itself:  ble, indicate N/A)
(	N/A

his date of each amendment(s) adoption:	, if other than the
Effective date it applicable: March 1, 2015  (no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 tollowing 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)	
(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.	
Dated 3-5-15	
Dated 3-5-15 Signature	
(By a director, president or other officer – if directors or officers have not been	<del></del>
selected, by an incorporator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Samuel R. Shaw, II	
(Typed or printed name of person signing)	
President	
(Title of person signing)	- '