Pr40003869

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	TGL INVESTMENT SOLUTION INC
DOCUMENT NUMBER:	P14000088869
The enclosed Articles of Amenda	nent and fee are submitted for filing.
Please return all correspondence	concerning this matter to the following:
	OSCAR O. LUKE
	Name of Contact Person
	TGL INVESTMENT SOLUTION INC
	Firm/ Company
	3834 BEST RD
	Address
	DAVENPORT FL 33837
	City/ State and Zip Code
	oscarluke@hotmail.com
E-ma	l address: (to be used for future annual report notification)
For further information concernin	
Name of Contact	
Enclosed is a check for the follow	ring amount made payable to the Florida Department of State:
	.75 Filing Fee &: S43.75 Filing Fee & S52.50 Filing Fee ifficate of Status (Additional copy is enclosed) (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Addra Amendment Se Division of Co P.O. Box 6327 Tallahassee, Fl	ction Amendment Section porations Division of Corporations Clifton Building

Articles of Amendment to Articles of Incorporation of

FILED

TGL INVESTMENT SOLUTION INC

	ZOID SEP 19 15
(Name of Corporation	as currently filed with the Florida Dept. of State)
P14000088869	Will the second
(Document)	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the obreviation "P A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	<u>ESS</u>)
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	3834 Best Rd Davenport Fl 33837
D. If amending the registered agent and/or registered	
new registered agent and/or the new registered of	ice address:
Name of New Registered Agent	
	(Florula street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register	tered Agent:
I hereby accept the appointment as registered agent. To	am familiar with and accept the obligations of the position.
Signet	ure of New Registered Agent if champing

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 Doc 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	<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>	<u>Name</u>	<u>Addres</u> s
1) X Change	<u>v</u>	Irene M. Stile	657 Sunset View Dr
Add			Davenport, FI 33837
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
4. 01			
6) Change			
Add			
Remove			

- LACID CO ///////////////////////////////////	Articles, enter change(s) here:
(Attach additional sheets, if necessar	της, του πρετιμές
	· · · · · · · · · · · · · · · · · · ·
	
	
If an amendment provides for an e	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	4)
(i) in the contract the contrac	• •
· · · · · · · · · · · · · · · · · · ·	

	2018	
The date of each amendment(s) adoption:date this document was signed.		, if other than th
Effective date if applicable:		
(no i	more than 90 days after amendment file date)	1
Note: If the date inserted in this block does not med document's effective date on the Department of State's		s, this date will not be listed as th
Adoption of Amendment(s) (CHECK	<u>ONE</u>)	
■ The amendment(s) was/were adopted by the shareh by the shareholders was/were sufficient for approv		endment(s)
☐ The amendment(s) was/were approved by the share must be separately provided for each voting group		
"The number of votes cast for the amendmen	t(s) was/were sufficient for approval	
by(voting gr		
(voting gr	оир)	
☐ The amendment(s) was/were adopted by the board action was not required.	of directors without shareholder action and sl	hareholder
☐ The amendment(s) was/were adopted by the incorpaction was not required.	orators without shareholder action and shareh	nolder
Dated 09/01/18		
Signature : Olean	or other officer – if directors or officers have	
	or other officer — if directors or officers have a tor — if in the hands of a receiver, trustee, or o	
appointed fiduciary by th		
	OSCAR O. LUKE	
Турес	d or printed name of person signing)	
	President	
	(Title of person signing)	