## P140000 89784

| (Req                      | uestor's Name)   |             |
|---------------------------|------------------|-------------|
| (Add                      | ress)            |             |
| (Add                      | ress)            |             |
| (City                     | /State/Zip/Phon  | e #)        |
| PICK-UP                   | ☐ WAIT           | MAIL        |
| (Bus                      | iness Entity Nar | me)         |
| (Doc                      | ument Number)    |             |
| Certified Copies          | Certificates     | s of Status |
| Special Instructions to F | iling Officer:   |             |
|                           |                  |             |
|                           |                  |             |
|                           |                  |             |

Office Use Only



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03/31/15--01013--026 \*\*35.00

TLYANTOR BAYE

APR 0 3 2014 C. CARROTHERS

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

| NAME OF CORPOR            | $_{ m ATION:}$ CLJ Serv   | ices, Inc.   |  |
|---------------------------|---|--|--|
| DOCUMENT NUMB             | ER: P14000089   | 784  |  |
| The enclosed Articles o   | f Amendment and fee are su  | abmitted for filing.   |  |
| Please return all corresp | ondence concerning this ma  | tter to the following:   |  |
| <u> </u>                  | Marc A Lynn   |  |  |
| <u>(</u>                  | CLJ Services,   |  | on   |
| -                         | 1521 NE 50th  | -  |  |
| <u>!</u>                  | Fort Lauderdal  |  | 3334   |
| Maı                       | rcjasfl@aol.co  | City/ State and Zip Co   | de   |
|                           |   | sed for future annual repor  | t notification)  |
| For further information   | concerning this matter, pleas   | se call:   |  |
| Marc Lynn                 |   | at (954  | <sub>)</sub> 557-2155  |
| Name of                   | Contact Person  | Area C   | ode & Daytime Telephone Number   |
| Enclosed is a check for   | the following amount made   | payable to the Florida Dep   | partment of State:   |
| ■ \$35 Filing Fee         | □\$43.75 Filing Fee & Certificate 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) |
| Amen<br>Divisi<br>P.O. I  | ng Address<br>dment Section<br>on of Corporations<br>Box 6327<br>hassee, FL 32314 | Amen<br>Divisi<br>Clifto   | t Address  dment Section on of Corporations n Building  Executive Center Circle        |

Tallahassee, FL 32301

## to Articles of Incorporation of

**Articles of Amendment** 

| OLU Services, inc.  |  |           |
|---|--|-----------|
| (Name of Corporation as currently filed with the Fle P1400089784  | orida Dept. of State)  |           |
| (Document Number of Corporation (if   | known)   |           |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:  | Florida Profit Corporation adopts the following amendm   | ent(s) to |
| A. If amending name, enter the new name of the corporation:   |  |           |
|   | The nev  | 141       |
| name must be distinguishable and contain the word "corporation<br>"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C<br>word "chartered," "professional association," or the abbreviation "I | ," "company," or "incorporated" or the abbreviatio<br>Co". A professional corporation name must contain th | n         |
| B. Enter new principal office address, if applicable:   |  |           |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )   | <b>=</b>   |           |
|   |  | 1         |
|   |  | 5         |
| C. Enter new mailing address, if applicable:  | A SA   | FILEU     |
| (Mailing address MAY BE A POST OFFICE BOX)  | - <del></del>  |           |
|   | デザー<br>- プロー   | e<br>D    |
|   | <u> </u>   | S         |
|   |  | 373       |
| D. If amending the registered agent and/or registered office address:  new registered agent and/or the new registered office address:   | ss in Florida, enter the name of the   |           |
| Name of New Registered Agent  |  |           |
|   |  |           |
| (Florida stree  | et address)  |           |
| New Registered Office Address:  | , Florida  |           |
| (City)  | (Zip Code)   |           |
|   |  |           |
| New Registered Agent's Signature, if changing Registered Agent:   |  |           |
| hereby accept the appointment as registered agent. I am familiar w  | th and accept the obligations of the position.   |           |
|   |  |           |
| Signature of New Registered As  | rent 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:                   | e, ana sai   | iy Smiin, Sv as an Ada. |  |
|----------------------------|--------------|-------------------------|--|
| 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) Change                  | V            | Anthony Balzano         | 1521 NE 50th Ct  |
| Add                        |              |                         | Fort Lauderdale, FL  |
| Remove                     |              |                         | 33334  |
| 2) Change                  |              |                         |  |
| Add                        |              |                         |  |
| Remove                     |              |                         |  |
| 3) Change                  |              |                         |  |
| Add                        |              | •                       |  |
| Remove                     |              |                         |  |
| 4) Change                  |              |                         |  |
| Add                        |              |                         |  |
| Remove                     |              |                         | Office and the second s |
| 5) Change                  | <del></del>  |                         |  |
| Add                        |              |                         |  |
| Remove                     |              |                         |  |
| 6) Change                  |              |                         |  |
| Add                        |              |                         |  |
| Remove                     |              |                         | <u></u>  |

| tach additional sheets, if necessary). | ticles, enter change(s) here: (Be specific)  |
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| ,                                      |  |
| William Wallist                        |  |
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| n amendment provides for an exch       | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| ovisions for implementing the ame      | nament if not contained in the amendment usen:   |
| (if not applicable, indicate N/A)      |  |

| The date of each amendment(s) adoption:   | _, if other than the |
|---|----------------------|
| 02/11/2015  |                      |
| Effective date if applicable: (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 following 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)  |                      |
| 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 03/11/2015  |                      |
| Signature  (By a director, president or other officer – if directors of officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed tiduciary by that fiduciary) | _                    |
| Marc A. Lynn  |                      |
| (Typed or printed name of person signing)   | -                    |
| President   |                      |
| (Title of person signing)   | -                    |