P14000102477

(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ci	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to MARKES Advise Uanu	sha Mash J to remuve the From Doc.

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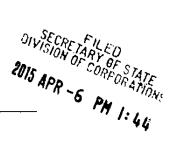


Amena (10 H, 9, 15

COVER LETTER

TO: Amendment Sect Division of Corp			
NAME OF CORPO	RATION: CR8IV OU	TRAGE INC	
DOCUMENT NUMI	BER: P1400010247	7	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	MARKESHA NAS	SH	
		Name of Contact Person	1
		Firm/ Company	,
	5681 EDENFIELD		· · · · · · · · · · · · · · · · · · ·
	JACKSONVILLE,	Address FL 32277	
		City/ State and Zip Cod	e
MN	IINC.BIZ@GMAIL		
	E-mail address: (to be us	ed for future annual report	notification)
For further informatio	n concerning this matter, pleas	e call:	
MARKESHA	NASH	at (404	539-4441 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	artment 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)
	iling Address endment Section		Address Iment Section
Division of Corporations		Divisio	on of Corporations
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle			
1 (1)			assee, FL 32301

Articles of Amendment to Articles of Incorporation of



CR8IV OUTRAGE INC

(Name of Corporation as currently filed with the	Florida Dept. of State)
P14000102477	
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this tricles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or word "chartered." "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	221 N HOGAN ST
(Principal office address MUST BE A STREET ADDRESS)	# 529
	JACKSONVILLE, FL 32202
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	221 N HOGAN ST
(Maning underess <u>MAY DE A TOST OT TOE BOTS</u>	#529
	JACKSONVILLE, FL 32202
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida :	street address)
New Registered Office Address:	, Florida
(Cit	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia	
Signature of New Registered	d Agent. 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: 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			
Add Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		-	
Add			
Remove			

<mark>If amending or adding additional</mark> Attach <i>additional sheets, if necessa</i> i	ny). (Be specific)	
		_
·		
		_
· · · · · · · · · · · · · · · · · · ·		
If an amendment provides for an	exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the (if not applicable, indicate N/2	e amendment if not contained in the amendment itself:	
(y not approacto, motoato 101	,	
····		

The date of each amendment(date this document was signed.		, if other than the
_	3/30/15	
Effective date <u>if applicable</u> .	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	
The amendment(s) was/were must be separately provided	e approved by the shareholders through voting groups. The following statement d 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	
by	(voting group)	
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated_3/30	/2015	
Signature (B	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)	_
	MARKESHA NASH	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	