P150000000191

(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Dusiness Littly Name)			
(Document Number)			
Certified Copies Certificates of Status			
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Mane ch 8 May 4.8,8 ATTN. TRENE

TO:	Amendment Section			
	Division of Corporations			

Division of Corporations	
NAME OF CORPORATION: PERRY M	CLAININC
DOCUMENT NUMBER: PI 5 000 00	0191
The enclosed Articles of Amendment and fee are submitted	for filing.
Please return all correspondence concerning this matter to the	e following:
PERRY BEN Nam	NETT WCLETA
PERRY MEC	MAIN IND
_	Firm/ Company
_29186 ROSA	5 7 Ci U 5
	Address
BIG PINE	KEY FI. 33043
City/	State and Zip Code
E-mail address: (to be used for	hotmail.com
E-man andress: (to be used for t	addre addition report notification)
For further information concerning this matter, please call:	; !
Perry B. M. Clain	at (305) 240-7103
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable	to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43	.75 Filing Fcc & SS2.50 Filing Fee
	tified Copy Certificate of Status
	ditional copy is Contified Copy
end	closed) (Additional Copy is enclosed)
	,
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Carporations Clifton Building
Taliahassee, FL 32314	2661 Executive Center Circle

Tailahassee, FL 32301



April 7, 2015

PERRY BENNETT MCCLAIN PERRY MCCLAIN INC 29186 ROSE DRIVE BIG PINE KEY, FL 33043

SUBJECT: PERRY MCCLAIN INC.

Ref. Number: P15000000191

We have received your document for PERRY MCCLAIN INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 315A00006879

	p.			
Articles of Amer	dment		DIVISECRET	ILFO
to Articles of Incorp	oration		OINSTON OF	GREOSTATE
of Older	1	•	APR -8	DI. ORA MONE
Name of Corporation as currently filed with the Flori	de Dent of	Stota)		TH 4:45
	da Dena di s	<u>state</u>)		•
P 1500000 191 (Document Number of Corporation (if kn	own)		···	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Articles of Incorporation:		corporation adopts t	he following am	endment(s) to
A. If amending name, enter the new name of the corporation:]			
PERRY'S CO. INC.	_1		The	new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional associution," or the abbreviation "P.A	". A profess	or "incorporated ional corporation i	" or the abbre name must cont	viation ain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				
rincepu office dadress <u>moor de a strout itanicos.</u> ;		<u> </u>		
_		·		
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	 		
-		ļ. 		
		<u> </u>		
D. If amending the registered agent and/or registered office address	s in Florida.	hter the name of	the	
new registered agent and/or the new registered office address:	7117 (01.004)			•
Name of New Registered Agent				
(Floridu street	address)			
New Registered Office Address:		Florida	Zip Code)	
(City)		1,	Lip Codey	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am famillar with	h and weent	the obligations of the	he position	,
Thereby accept the appointment as regionered agent. Than January	, una accopi		- poolitoit	
Signature of New Registered Age	ent, if changin	ng		
		1		
		1		

Page 1 of 4

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 hald. 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, Example:	, and Sal	ly Smith, SV as an Add.	
X.Change	PT	John Doc	
X Remove	Y	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		ı	
5) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
6) Change			
Add			·
Remove			

the

The date of each amendment(s) adoption: date this document was signed.	, if other than
Effective date if applicable: 04-08-3015 (no more than 90 days after amen	iment file date)
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes by the shareholders was/were sufficient for approval.	ast for the amendment(s)
the amendment(s) was/were approved by the shareholders through voting groups must be separately provided for each voting group entitled to vote separately on	. The following statement the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for ap	toval
by (voting group)	."
(voting group)	
The amendment(s) was/were adopted by the board of directors without sharehold action was not required.	er action and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action was not required.	on and shareholder
Dated 04-08-2015	
Signature B. McClair	
(By a director, president or other officer – if directors of	
selected, by an incorporator - if in the hands of a receiv appointed fiduciary by that fiduciary)	e; trustee, or other court
PERRY B. MCCLAI	NY.
(Typed or printed name of per	s m signing)
Owner/ President	
(Title of person signing	g