, (F	Requestor's Name)		
(A	address)		
(F	address)		
(0	City/State/Zip/Phone #)		
	☐ WAIT ☐ MAIL		
(E	Business Entity Name)		
(C	Occument Number)		
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			
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COVER LETTER

TO: Amendment Section Division of Corporations

> P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION:	AMERICA	' KATED	GROUP, INC.	
DOCUMENT NUMBER:/	0150000	00822		
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence of	concerning this matter to t	he following:	•	
	Stephen A	L. BAINT	ne V	
	Stephen A	ne of Contact Person		
<u>.</u>	AMERICA	RATED	GROUP, INC.	
		Firm/ Company		
	292 1	CAN PAL Address	MROAD	
				
	BOCA	RATON,	FL 33432	
	City	/ State and Zip Code		
E-mai	SLBAINTE address: (to be used for the	on o Yaho future annual report n	O. COM otification)	
	`	•	,	
For further information concerning	g this matter, please call:			
Stephen A	Bainton	_at (56/	654-9433 & Daytime Telephone Number	
Name of Contact I	erson	Area Code	e & Daytime Telephone Number	
Enclosed is a check for the follow	ing amount made payable	to the Florida Depart	ment of State:	
	ificate of Status Ce (Ac	3.75 Filing Fee & rtified Copy dditional copy is closed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Addre Amendment Se Division of Cor P.O. Box 6327	etion		nent Section of Corporations	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

FILED

	of		
AMERICA RATE	D GROUP		32
(Name of Corporation as currently file	ed with the Florida Dept.	of State)	
P1500000	0822	TALL AHASSEE, FLORI	IĎA
(Document Number of C		The state of the s	•
Pursuant to the provisions of section 607.1006, Florida ts Articles of Incorporation:	Statutes, this Florida Proj	fit Corporation adopts the following	amendment(s)
. If amending name, enter the new name of the cor	poration:		
LOBSTERHEAD, Z	TNC.		The new
LOBSTERHEAD, Z name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the a	" "corporation," "compai " "Inc," or "Co". A pro	ny," or "incorporated" or the ab fessional corporation name must c	obreviation contain the
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDI</u>		2	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX		2	
). If amending the registered agent and/or registere new registered agent and/or the new registered o		da, enter the name of the	
Name of New Registered Agent N/A			
	(Florida street address)		
New Registered Office Address:MA		, Florida	
	(City)	(Zip Code)	-
New Registered Agent's Signature, if changing Registered Agent. I hereby accept the appointment as registered agent.	stered Agent: am familiar with and acce g v Registered Agent, if char	· · · · · ·	
Signature of New	v Registered Agent, if char	nging	

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 Do	<u>oe</u>		
X Remove	$\underline{\mathbf{v}}$	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change		_	N/A		
Add Remove					
2) Change					
Add Remove					
3) Change		_			
AddRemove					
4) Change					
Add					
Remove 5) Change					
Add		_			
Remove					
6) Change		_			
Remove					

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- Maria - L		
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<u> </u>		
		·
visions for implementing the amend	ange, reclassification, or cancellation of issued share dment if not contained in the amendment itself:	<u>s.</u>
(if not applicable, indicate N/A)	. 1 / 2	
-	N/A	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	_
(no more than 90 days after amenament 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 3-7-2015 Signature 4344	
Signature Signature	
(By a director, president or other officer - if directors or officers have not been	_
selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
STEPHEN L, BAINTON	
(Typed or printed name of person signing)	
CFO	
(Title of person signing)	

40.