P15000002907

(Re	questor's Name)	
(Ad	dress)	-
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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APR 1 6 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Crescer DOCUMENT NUMBER: P1500000	nt City Craft Cor 2907	mpany		
The enclosed Articles of Amendment and fee are				
Please return all correspondence concerning this	matter to the following:			
Julie A. Maur	er			
	Name of Contact Person	1		
	Firm/ Company			
137 Franklin	Ave			
 	Address			
Pomona Park	k, FL 32181			
	City/ State and Zip Cod	C		
zannajane@att ı	net			
zannajane@att.i	e used for future annual report	notification)		
2 man address. (to be	cased for facule difficult report	nomeason,		
For further information concerning this matter, pl	lease call:			
Julie A. Maurer	a. 954	,913-1318		
Name of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made	de payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee & Certificate of Status		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address	Street	Address		
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Crescent City Craft Company		
(Name of Corporation as currently filed with the Flo	rida Dept. of State)	产品 55
P15000002907		
(Document Number of Corporation (if k	(nown)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this FI	lorida Profit Corporation adopts the fo	ollowing amendment(s)
its Articles of Incorporation:		NO: 2
A. If amending name, enter the new name of the corporation:		21
Redneck Ranch Company		The new
name must he distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	o". A professional corporation name	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office address: Name of New Registered Agent N/A	ss in Florida, enter the name of the	
(Florida stree	t address)	
New Registered Office Address: N/A	, Florida	
(City)	(Zip Co	ode)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with Signature of New Registered Agent		sition.

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	PT	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>	Address
1) Change		N/A	
Add			
Remove			
2) Change		N/A	·
Add			
Remove			•
3) Change		N/A	
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here. (Attach additional sheets, if necessary). (Be specific)			
N/A	ty). (Be specific)		
* · · · · · · · · · · · · · · · · · · ·			
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<u> </u>			
		•	
			
E. If an amendment muscides for an	arahanaa raalaasifiaati	on or consollation of ices	and shower
F. If an amendment provides for an provisions for implementing the	amendment if not conta	tined in the amendment i	tself:
(if not applicable, indicate N	4)		
N/A			
·····			
	<u> </u>		

The date of each amendment(s) adoption:	, if other than the
date this document was signed. Effective date if applicable: 04/11/15	
(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 east 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 04/11/15	
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)	
Julie A. Maurer	
(Typed or printed name of person signing)	
President	
(Title of person signing)	