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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: medi law Firm/ Company For further information concerning this matter, please call: 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 Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

> 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment

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. Articles of An	nendment	0/8 "
to to		
Articles of Inco	orporation	(y)
of	,	( <del>(</del> ))
	Norton UDPA	
(Name of Corporation as currently	filed with the Florida Dept. of State)	4
P15000	0010904	154
(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 follo	wing amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name m	e abbreviation ust contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<del> </del>	<del></del>
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	19097 Cloister Boca Raton, FL	<u>lake</u> lane ., 33498
D. If amending the registered agent and/or registered office address:		
Name of New Registered Agent		
		<del></del>
(Florida stre	et addressi	
New Registered Office Address:	, Florida	
(		Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position	on.
Signature of New Re	egistered 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 Do	<u>e</u>	
X Remove	<u>V</u>	Mike Joi	nes	
X Add	<u>sv</u>	Sally Sm	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
l) Change	-	<u> </u>	<del></del>	<del></del>
Add				
Remove				
2) Change	<u>.</u>	_		
Add				
Remove				
3) Change				
Add			•	
Remove				
4) Change	<u> </u>	<u> </u>		
Add				
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5) Change		_		
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Add				
Remove				

If amending or adding additional Arti- (Attach additional sheets, if necessary).	(Be specific)		
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f an amendment provides for an exch provisions for implementing the amer			
(if not applicable, indicate N/A)	roment it not contained in	the amendment reserv	<u>•</u>
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The date of each amendment(s) addite this document was signed.	option:	, if other than th
Ξ		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, the artment of State's records.	nis date will not be listed as th
adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were sur	oted by the shareholders. The number of votes cast for the amendaticient for approval.	nent(s)
	oved by the shareholders through voting groups. The following stach voting group entitled to vote separately on the amendment(s)	
"The number of votes east fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	oted by the board of directors without shareholder action and share oted by the incorporators without shareholder action and sharehold	
	Jebruary 19/2018	
selected	ector, president or other officer – if directors or officers have not by an incorporator – if in the hands of a receiver, trustee, or other diductary by that fiductary)	
-	(Typed or printed name of person signing)	<del></del>
-	(Title of person signing)	