P15000014457

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(É	Business Entity Name)	
(0	Ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions t	o Filing Officer:	
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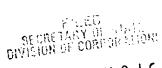
2-27-15

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Holloway H	ospitality Resou	rces Corp.
	BER: P1500001445		
	of Amendment and fee are sub		
Please return all corres	spondence concerning this matt	er to the following:	
	Spencer D. Ford		
		Name of Contact Person	
		Firm/ Company	
	3417 West Dewey	y Street	
		Address	
	Tampa, FL 33607	•	
		City/ State and Zip Code	:
	E-mail address: (to be use	ed for future annual report	notification)
	· ·	1	,
For further information	n concerning this matter, please	e call:	
Spencer D. F	ord	at (813	375-1189
Name	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	ayable to the Florida Depa	rtment 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)
Ame Divi P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle
		Tallaha	ssee, FL 32301

Articles of Amendment to Articles of Incorporation of



Holloway Hospitality Resources Corp.

15 FEB 26 PH 2: 46

		4.0		
(Name of Corporation as currently file P15000014457	ed with the Florida L	Jept. of State)		
(Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida	Profit Corporation adop	ts the following	amendment(s) to
A. If amending name, enter the new name of the cor	rporation:			
			7	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp,' word "chartered," "professional association," or the a	" "Inc," or "Co". A			
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>)				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	 Ā			
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		lorida, enter the name o	of the	
Name of New Registered Agent				
	(Florida street addre	264)		
N. D 100	•	,		
New Registered Office Address:	(City)	, Florida	(Zip Code)	
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I		accept the obligations of	the position.	
Signature of Nex	w Registered 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>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	Т		Spencer D. Ford	3417 West Dewey Street
Add				Tampa, FL 33607
Remove				
2) Change				
Add				
Remove				
3) Change				
Add		_		
Remove				
4) Change				
Add		_		
Remove				
5) Change	 ,,,			
Add				
Remove				
6) Change		_		
Add				
Remove				

amending or adding additional Artic ttach additional sheets, if necessary).	(Be specific)
	
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an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: , if other than the date this document was signed. 15 FEB 26 PM 2: 46 Effective date if applicable: (no more than 90 days after amendment file date) (CHECK ONE) Adoption of Amendment(s) 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 (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_February 22, 2015 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) Spencer D. Ford (Typed or printed name of person signing)

Incorporator

(Title of person signing)