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SECRETARY OF STATE TALLAHASSEE, FLORID,

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	FION: Shawn L Miller In	c	
DOCUMENT NUMBER	D16000016604		
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.	
Please return all correspon	ndence concerning this ma	tter to the following:	
Da	le Abbott		
		Name of Contact Person	1
		Firm/ Company	
21	79 Canal Road		
		Address	
Pa	m Beach Gardens, FL 33	410	
_		City/ State and Zip Code	
dma5400	@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information co	ncerning this matter, pleas	se call:	
Dale Abbott		786 at (2055700
Name of C	ontact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for th	e following amount made	payable to the Florida Depa	artment 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)
Amenda Division P.O. Bo	Address ment Section of Corporations x 6327 ssee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Shawn L Miller Inc (Name of Corporation as currently filed with the Florida Dept. of State) P15000015604 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation; N/A The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 2179 Canal Road B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Palm Beach Gardens, FL 33410 C. Enter new mailing address, if applicable: 2179 Canal Road (Mailing address MAY BE A POST OFFICE BOX) Palm Beach Gardens, FL 33410 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New 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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	v	Charleston Banton	2226 Ridgewood Circle
x Add			Royal Palm Beach, FL 33411
Remove			
2) Change		_	
Add			The state of the s
Remove			
3) Change			SE SE
Add			- CREE
Remove			ASSET
4) Change			
Add			TATE ORIDA 5.56
Remove			
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Remove			
6) Change		_	
Add			· · · · · · · · · · · · · · · · · · ·
Remove			

Attach additional sheets, if necessary).	(Be specific)		
			
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provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself;	PM 2:	

The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.	0,2015	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Department.	ck does not meet the applicable statutory filing requirements, this date artment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adop by the shareholders was/were suff	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.)
	oved by the shareholders through voting groups. The following statementach voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
action was not required. The amendment(s) was/were adopt action was not required. July 10, 2013 Dated Signature (By a direst selected, appointed)	ted by the board of directors without shareholder action and shareholder and by the incorporators without shareholder action and shareholder action and shareholder action, and shareholder action ac	SECRETARY OF STATE TALLAHASSEE, FLORIDA
_	(Typed or printed name of person signing)	
F	resident	
-	(Title of person signing)	<u>.</u>