·
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Octation Octation of Status
Special Instructions to Filing Officer:
Special instructions to raining officer.

Office Use Only



000271294690

04/07/15--01006--016 \*\*35.00



Anua 4.4.15

## **COVER LETTER**

1.00

O: Amendment Section Division of Corporations
OCUMENT NUMBER: PISODED 33900
the enclosed Articles of Amendment and fee are submitted for filing.
lease return all correspondence concerning this matter to the following:
Sabrina Delancy  Name of Contact Person  Delancy Sparke  Firm/ Company  3055 Rogers Que  Address  Address  Tacksonsine FL 32208  City/ State and Zip Code  Sabrina delancy Que nou-com  E-mail address: (to be used for future annual report potification)
For further information concerning this matter, please call:
Name of Contact Person  at ( 904) 245-9982  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status  Certificate of Status  Certificate of Status  Certificate of Status  (Additional copy is enclosed)  Certified Copy  (Additional Copy is enclosed)
Mailing Address Amendment Section  Street Address Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## **Articles of Amendment**

to

## Articles of Incorporation

of
Delancy sparkle Inc
(Name of Corporation as currently filed with the Florida Dept. of State)
P15000000000000000000000000000000000000
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
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."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
(Mulling uddress <u>MAT BLATOST OTTICL BOA)</u>
The state of the s
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) (Zip Code)
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 <math>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>	<u>Name</u>	<u>Addres</u> s
1) L Change	P	<u> </u>	3055 ROPURS AUR
Add		_ Sabeina Deland Sabeina Holland	Jan , FC 32 200
2) L Change	V		3055 ROGERS AUC
Add		Sabeina Delancy Sabeina Holland	Jacksonville, Fl3 2208
3) L Change	5	<u> </u>	3055 ROJERS ALE
Add		- Sabrina Delancy Sabrina Holland	Jacksenville, pr 3 1200
4) L Change	I	· · · · · · · · · · · · · · · · · · ·	3055 logers All
Add	·	Sabrina Deloncy Sabrina Holland	Locksmile, FL 32-208
5) Change			
Add Remove			
6) Change			
Add			<del></del>
Remove			

attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
provisions for implementing the ame	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(AL.L	
()	
(3	
()	
()	
()	

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(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 cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(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	
Signature Salara Delava	
(By a director, president or other officer – if directors coofficers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person (gning)	
President (Title of person signing)	_