P15000026174

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: IFBEWO PATEN	TS & MARKS INC				
DOCUMENT NUMBER: P15000026174					
The enclosed Articles of Amendment and fee are su	bmitted for filing.				
Please return all correspondence concerning this ma	tter to the following:				
CAROLINA MENEGHETT	I				
	Name of Contact Person				
SAFETY BUSINESS LLC					
	Firm/ Company				
6220, S ORANGE BLOSSO	M TRAIL, SUITE 600				
	Address				
ORLANDO, FL 32809-US					
 	City/ State and Zip Code				
CAROLINA@SAFETYTAX.COM	И				
E-mail address: (to be us	sed for future annual report notification)				
For further information concerning this matter, please CAROLINA MENEGHETTI					
	at (407) 888 4747 Area Code & Daytime Telephone Number				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee \$\times \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

Articles of Amendment

to
Articles of Incorporation

rticles of Incorporat, of

IF BEWO PAT	tents & m	1ARKS	Ive			
(<u>N</u> am	e of Corporation as cur	rently filed wi	<u>ith the Florida E</u>	Dept. of State)		
P1500002617L	1					
<u> </u>	(Document Numb	her of Corpora	tion (if known)			
Pursuant to the provisions of section 60 its Articles of Incorporation:	07.1006, Florida Statutes.	this <i>Florida F</i>	Profit Corporation	n adopts the follow	ing amendme	ent(s) to
A. If amending name, enter the new	name of the corporation	<u>n:</u>				
					The new	v
name must be distinguishable and c "Corp.," "Inc.," or Co.," or the des word "chartered," "professional asso	ignation "Corp," "Inc,"	or "Co". A				
B. Enter new principal office addre		~ 			53.	
(Principal office address <u>MUST BE</u> A	(STREET ADDRESS)				- 33°	T I
					7. O	PH 12: 3
C. Enter new mailing address, if ag (Mailing address MAY BE A POS					- জন 	2
D. If amending the registered agent			orida, enter the	name of the		
new registered agent and/or the	C0 ===	<u> </u>	K-CC 1			
Name of New Registered Age	" OHFEIT	ROSIF		<u>. L C </u>		_
	6220 8	s. ORAN	JETE BLO	SSOM TRL	STE E) (OQ:
		da street addres	is)	ລາ	ora.	
New Registered Office Addre	ss: ORLAND((City)		Florida	in Code	
		(Cuit)		120	p coucy	
New Registered Agent's Signature, i I hereby accept the appointment as re			uccepi the obliga	tions of the position	n.	
		Jun	1			
	Signature of N	Vew Registered	l Agent, if changi	ing		
		/				

Page 1 of 4

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	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DIRECT	RENATO J DAVID	13312, HALKYN PT,
Add X Remove			ORLANDO, FL 32832-US
2) Change	DIRECT	LORDCREEK REVOCABLE TRUS	6220, S ORANGE BLOSSOM TR
X Add			SUITE 600
Remove			ORLANDO, FL 32809-US
3) Change		And the second s	
Add			
Remove			
4) Change			
Add		•	
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttacl	h additional shee	g additional Art ts, if necessary).	(Be specific)				
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prov	amendment provisions for imple (if not applicable	ovides for an exc ementing the am e, indicate N/A)	hange, reclassif endment if not c	ication, or cance contained in the	llation of issued amendment itse	shares, lf:	
				·			
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The date of each amendment(s) adoption: this document was signed.	, if other than the
Effective date if applicable: OCTOBER 15, 2015 (no more than 90 days after amendment file)	
(no more than 90 days after amendment file	e date)
Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	ne amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The formust be separately provided for each voting group entitled to vote separately on the ame	
"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 action was not required.	and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	shareholder
Dated OCTOBER 15, 2015	
Signature X	
(By a director president or officer if directors or officers selected, by an incorporator – it in the hands of a receiver, truste appointed fiduciary by that fiduciary)	have not been e, or other court
RENATO J DAVI	D
(Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
OFFICER DIRECT	OR_
(Title of person signing)	