P1500002709/

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S. TALLENT

OCT 0 6 2016

Amend

6 SEP 29 PM 2: 30

COVER LETTER

Division of Corporations
NAME OF CORPORATION: ADELHEIDIS FRANCHISOR INC DOCUMENT NUMBER: [2 (500002709)
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MARION SCHUPPENHAVER
Name of Contact Person
MANIMA HOLDING
Firm/ Company
SOS C STH AVE S
NAPLES FL: 34102 7
City/ State and Zip Code
ADECHEIDIS FRANCIHISE & GMAIL. CON E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
IARION SCHUPPENHAUER 239, 384 ORIS

□\$43.75 Filing Fee & `

(Additional copy is

Certified Copy

enclosed)

Mailing Address

Name of Contact Person

\$35 Filing Fee

Enclosed is a check for the following amount made payable to the Florida Department of State:

□\$43.75 Filing Fee &

Certificate of Status

TO: Amendment Section

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

Area Code & Daytime Telephone Number

□\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

Articles of Amendment to , Articles of Incorporation of

, , ,	•	HISBK I	IVC
(Name of Corporation as curr	ently filed with	h the Florida Dept, of Stat	<u>e</u>)
P15 0000 27	091		
(Document Numb	er of Corporation	on (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this <i>Florida Pro</i>	ofit Corporation adopts the	following amendment(s)
A. If amending name, enter the new name of the corporation	<u>:</u>		,
ADECHEIDIS FRANCI	+(Ś E	INC: V	The new
name must be distinguishable and contain the word "corpor" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviati	ation," "comp or "Co". A pi	any," or "incorporated"	or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	. ,		
,			Phi o
	•	•	<u> </u>
	•		2 SS
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			္ကိုုိ
(Manning and ess MANY BE ITT OUT OF THE BOX)	. •	*	<u> </u>
	. · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	<u> </u>
			30 DA
D. If amending the registered agent and/or registered office a	adduess in Fla	side outsuithe name of the	
new registered agent and/or the new registered office add		rida, enter the name of the	•
Name of New Designand Asset	•		
Name of New Registered Agent	•	· · · · · · · · · · · · · · · · · · ·	
(Fl:	la street address)		
(rioria	a street aaaress)		
New Registered Office Address:	(Ota.)	, Florida	
	(Oity)		(Zip Code)
	•	•	
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famil	tent: iar with and ac	ecept the obligations of the p	oosition.
	. •	, .	
Signature of N		Agent, if changing	
orginal are of the	108,010,00	-a, yaa	

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 D	<u>oe</u>		
X Remove	V Mike Jo	ones		
_X Add	SV Sally S	<u>mith</u>		
Type of Action (Check One)	<u>Title</u>	Name	_	Address
1) × Change	CEO	JENS SCHO	IPPEN HAUER	
Add	•		·	34102 NAPLES FL
Remove				· · · · · · · · · · · · · · · · · · ·
2) Change Add	P !	MARION SCHUPPE	NHAVER	678 E LALE DR. 34,02 NAPLES FL
Remove			•	
3) Change			. *	
Add			•	
Remove			,	
4) Change				.· · ·
Add				
Remove				
5) Change				· · · · · ·
Add				
Remove				
			. #	
6) Change				· · · · · · · · · · · · · · · · · · ·
Add			• •	
Remove				

f amending or adding additional Articles, enter Attach additional sheets, if necessary). (Be spec	ific)
	·
	<u> </u>
	• •
	
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	·
f an amendment provides for an exchange, recl provisions for implementing the amendment if	assification, or cancellation of issued shares,
(if not applicable, indicate N/A)	not contained in the amendment usen.
MANIMA HOLD	ING HOLDS 100%
	110CB2 100 10
OF THE SHARES	*
IENS SCHURRE	ENHAVER HOLDS 0%
	_ ·
	5 F
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OI THE SHARE	-3,
OI THE SHARE	·

The date of each amendment date this document was signed		·	· · · · · · · · · · · · · · · · · · ·	, if other than the
Effective date if applicable:	JULY 1	2016	2 nendment file date)	
	(no more th	an 90 days after am	nendment file date)	
	this block does not meet the a he Department of State's record		filing requirements, this date	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	•		
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. ere sufficient for approval.	The number of vot	es cast for the amendment(s)	
	re approved by the shareholders ed for each voting group entitle			t .
"The number of votes	s cast for the amendment(s) was	s/were sufficient for	approval	
by		*	H	
	(voting group)			
☐ The amendment(s) was/wer action was not required.	re adopted by the board of direc	ctors without shareh	older action and shareholder	
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators	without shareholde	r action and shareholder	
D I	9/25/16	•	·	
Dated	000			
Signature _	(KII)			
Se	By a director, provident or other elected, by an incorporator – if ppointed fiduciary by that fiduc	in the hands of a rec		
		,	DOE NULLAUK	= <i>e</i>
	(Typed or prin	nted name of person	PPENHAUR I signing)	
	.			
	CEO	itle of person signi		
DAT	E, 9/25/	16		
516	NATURE :	1. Schur	2	
WA11	ME : MARION	Scilup	PENHAUER	
·	E: Pheside			
1170	· L. Mesilve			