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MAY 27 2015

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPOR	Greg's Deals. Inc		
DOCUMENT NUME	P15000043062 ER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
	Greg Kimmons		
		Name of Contact Person	n
	Greg's Deals. Inc		
	692 Arbor Glen Circle Apt. l	Firm/ Company 05	
		Address	
	Lakeland, FL 33805	Address	
•		City/ State and Zip Cod	e
gregk	mmons@verizon.net		
	E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, please	se call:	
Greg Kimmons		813 at (995- 1391
Name o	f Contact Person	Area Co)de & Daytime Telephone Number
Enclosed is a check for	the 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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILE

	- 00 U (0 10 US, 10
(Name of Corporation as curren	15 MAY 19 49 像: 13 tly filed with the Florida Dept. of State)
P15000043062	SECAPTALLES FIGIL FALLARIZATE PROPERTY
(Document Number	of Corporation (if known)
·	45%
ursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the following amendmen
. If amending name, enter the new name of the corporation:	
N/A	The new
ame must be distinguishable and contain the word "corporate Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or cord "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
. Enter new principal office address, if applicable:	692 Arbor Glen Circle
Principal office address MUST BE A STREET ADDRESS)	Apt 105
	Lakeland, FL 33805
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Po. Box 1743
	Lakeland, FL 33805
new registered agent and/or the new registered office addre	
new registered agent and/or the new registered office address	
new registered agent and/or the new registered office address N/A Name of New Registered Agent	
N/A Name of New Registered Agent	<u>ss:</u>

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: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P	Greg Kimmons	692 Arbor Glen Circle
x Add			Apt 105
Remove			Lakeland, FL 33805
2) Change	N/A		
Add			
Remove			
3) Change	N/A		
Add			
Remove			NI
4) Change	N/A		
Add			
Remove			
5) Change	N/A		
Add			
Remove			
6) Change	N/A		
Add			
Remove			

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
Greg Kimmons, P to be added.	(-
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· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , ,
provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A) N/A	•
	· · · · · · · · · · · · · · · · · · ·
	
 	

The date of each amendment date this document was signed		, if other than th
and this document that digital	N/A	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament fite date)	
	this block does not meet the applicable statutory filing requirements, this dathe Department of State's records.	te will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/wei by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(sere sufficient for approval.)
	re approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholde	г
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated	5-15-2015	
	F-15-2015 And Dung	
	by a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
	opointed fiduciary by that fiduciary)	
	Fred Thompson FEED THOMPSON	
	(Typed or printed name of person signing)	
	Officer	
	(Title of person signing)	