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AUG 14 2015
ALBRITTON

COVER LETTER

Division of Corporations NAME OF CORPORATION: 50000 45.2 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company PONNY. RIEMER (DICLOUD. COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$43.75** Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

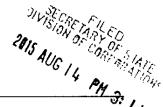
TO: Amendment Section

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

Articles of Amendment to Articles of Incorporation of



	the filed with the Florida Dent of State)
(Name of Corporation as curren	ttly filed with the Florida Dept. of State)
P 150	000 45363
	of Corporation (if known)
(
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporate	ion" "company" or "incorporated" or the abbreviation
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	2151 NE 212 HC+
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Williston FL 32696
C. Enter new mailing address, if applicable:	11 A T T T T T T T T T T T T T T T T T T
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	No Change
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
Name of New Registered Agent / /m /-	PerLman
2157 N	Street address)
(Florida s	street address)
New Registered Office Address: W, (1)	
The state of the s	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ager	at:
I hereby accept the appointment as registered agent. I am familian	r with and accept the obligations of the position.
1 0	
X (1)	<i>(</i>
- Jim tus	lu
Signature of New	Registered Agent, if changing

address of each Offic (Attach additional she		cer/director being removed and title, name, and
P = President; V= V, Executive Officer; Cl held. President, Treas Changes should be no a change, Mike Jones	r/director title by the first letter of the office title: lice President; T= Treasurer; S= Secretary; D= Director; TR FO = Chief Financial Officer. If an officer/director holds me surer, Director would be PTD. oted in the following manner. Currently John Doe is listed as s leaves the corporation, Sally Smith is named the V and S. Th nove, and Sally Smith, SV as an Add.	ore than one title, list the first letter of each office the PST and Mike Jones is listed as the V. There is
Example: X_Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) X Change	VP RONNY RIEMER	3402 SW 34494 OCALA FE 34494
Add		DOLA 1-2 34479
Remove		
2) Change	P_ Kim Perlman	WILLISTON FR 32696
Add	Kmi Fu Le	Williston Fr 30696
Remove	,	
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		

_Remove

No Changes"			
NO Changes"			
V. 10.00000		e	Andrew Control of the
·			
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	······································		
If an amendment provides for an exchange, reclase provisions for implementing the amendment if no (if not applicable, indicate N/A)			
No changes"			
			<u> </u>
			

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment)	file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the Department of State's records.	uirements, 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 by the shareholders was/were sufficient for approval.	the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the an	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	,,
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action as action was not required.	nd shareholder
Dated	
(By a director, president or other officer – if directors or office	ers have not been
selected, by an incorporator – if in the hands of a receiver, true	
appointed fiduciary by that fiduciary)	,
(Typed or printed name of person signing)	
(Typed of princed famile of person signing)	
(Title of person signing)	
(Title of person signing)	