P15000046759

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DIVISION OF CORPORATIONS

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JUL 9 2015

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	Turmondo, Inc.		
DOCUMENT NUME	P15000046759		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Johnny Miller		
		Name of Contact Person	1
	Turmondo, Inc.		
	30991 Singletary Road	Firm/ Company	
	Address Myakka City, Florida 34251		
		City/ State and Zip Cod	e
Same	as on file		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Johnny Miller		803 at (524-6018
Name o	of Contact Person	Area Code & Daytime Telephone Numb	
Enclosed is a check fo	r 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Turmondo.	Inc.	UIVISION OF CORPORATE
(Name of Corporation as curr P15000046759	ently filed with the Florida Dept. of State)	15 JUL - 1 AM 9: 4
	er of Corporation (if known)	
·	•	
Pursuant to the provisions of section 607.1006, Florida Statutes, tits Articles of Incorporation:	this Florida Profit Corporation adopts the fo	illowing amendment(s) to
A. If amending name, enter the new name of the corporation	<u>:</u>	
		The new
name must be distinguishable and contain the word "corpor" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," of word "chartered," "professional association," or the abbreviation	or "Co". A professional corporation name	
D. D	ALL SAME THIS PAGE	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add		
Name of New Registered Agent		
	a street address)	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	Florida	ontext condition the
New Registerea Office Address.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Ag	ent:	cition
I hereby accept the appointment as registered agent. I am famil	sar wan and accept the obugations of the pos	mon.
Signature of Ne	ew 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 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>	Address	
1) Change	VP	Robert Sisk	30991 Singletary Rd. Myakka City	
Add			Florida 34251	
X Remove				
2) Change	VP	JOSHUA MILLER	30991 Singletary Rd. Myakka City	
X Add			Florida 34251	
Remove				
3) Change				
Add				
Remove				
		•		
4) Change		<u> </u>		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

NE '	adding additional Anal Sheets, if necessar	y). (Be specific)			
			(m		
				· · · · · ·	
provisions for	ent provides for an e implementing the a plicable, indicate N/A	<u>amendment if not c</u>	cation, or cancellat ontained in the ame	ion of issued shares endment itself:	3.
	·				
			···		
					

	t(s) adoption:	, if other than the
date this document was signed	l. 06-12-2015	FILEO
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	SPORE TARY OF STATE DIVISION OF CORPORATIONS
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, thi he Department of State's records.	s daliberth in the interest of the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	re adopted by the shareholders. The number of votes cast for the amendmere sufficient for approval.	ent(s)
	re approved by the shareholders through voting groups. The following stated for each voting group entitled to vote separately on the amendment(s):	tement
"The number of vote PRESIDENT AN	s cast for the amendment(s) was/were sufficient for approval ND VP.	
	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareh	oolder
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholde	SECRE VISION
JUN	E 12, 2015	- OF C
Dated Signature _	CAM ST	FOF SIA ORPORA AM 9:
(I s	By a director, president or other officer – if directors or officers have not be elected by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	een 5 3
	JOHNNY MILLER	
	(Typed or printed name of person signing)	
	PRESIDENT	
*	(Title of person signing)	