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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: ____NGK Management, Inc DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Trisha Bailey Name of Contact Person NGK Management, Inc. Firm/ Company 2109 Brewster Ct Address Orlando, FL 32833 City/ State and Zip Code tbailey0802@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Trisha Bailey Name of Contact Person 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

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

(Additional copy is

enclosed)

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certified Copy (Additional Copy

is enclosed)

Articles of Amendment to Articles of Incorporation of

NGK Management, Inc

P15000046935		
(Docu	ment Number o	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floridate Articles of Incorporation:	da Statutes, this	Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new name of the o	corporation:	
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corword "chartered," "professional association," or the	p," "Inc," or '	"P.A." The new on," "company," or "incorporated" or the abbreviation of the abbreviat
3. Enter new principal office address, if applicab	<u>le:</u>	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		2109 Brewster CT
		Orlando, FL 32833
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2109 Brewster CT
		Orlando, FL 32833
D. If amending the registered agent and/or registence new registered agent and/or the new registered.		
Name of New Registered Agent Trisha Bai	iley	
2109 Brev	vster CT	
	(Florida sti	reet address)
		32833
New Registered Office Address:		. Florida 32833

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		<u>PT</u>	John Doe			
<u>X</u> R	emove	<u>v</u>	Mike Jones			
<u>X</u> A	Add	<u>sv</u>	Sally Smith			
Type (Chec	of Action ck One)	<u>Title</u>	Name	<u>Addres</u> s		
1) _	Change	PT	Natalia Marie Gates	2109 Brewster CT		
_	Add			Orlando, FL 32833		
<u>x</u>	Remove					
	Change	PT	Trisha Marie Bailey	2109 Brewster CT		
	Add			Orlando, FL 32833		
	Remove					
3)_	Change		_			
	Add					
_	Remove					
4)	Change	<u> </u>	_			
	Add					
	Remove					
5) _	Change					
	Add					
_	Remove					
6)	Change					
~/ _	Add		-			
	Remove					

Attach <i>additional sheets, if r</i>	necessary).	icles, enter change(s) here: (Be specific)	
			
· · · · · · · · · · · · · · · · · · ·			
· · ·			
	<u></u>		

If an amendment provides	for an exch	hange, reclassification, or cancellation of issued shares,	
provisions for implementi (if not applicable, indic	ing the amer	endment if not contained in the amendment itself:	
(у погарупсате, так	care way		
	<u></u>	······································	

11/2/2015	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment fi	le 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.	irements, 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 function must be separately provided for each voting group entitled to vote separately on the amendment(s) was/were approved by the shareholders through voting groups. The function is a superior of the same approved by the shareholders through voting groups.	
"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 action was not required. ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required. 	
11/2/2015 Dated	
Signature	
(By a director, president or other officer - if directors or officer	
selected, by an incorporator – if in the hands of a receiver, trust	ee, or other court
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	Gales
President President	
(Title of person signing)	
(Title of person signing)	

