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## **COVER LETTER**

TO: Amendment Sect Division of Corpo			
	RATION: <u>Carol L</u>		
DOCUMENT NUMI	BER: <u>47-42</u>	72653/	P15 0000 5000
The enclosed Articles	of Amendment and fee are su	/ abmitted for filing.	
Please return all corre	spondence concerning this ma		
	Carol Las	Houf	
		Name of Contact Perso	n
	Carol la	Houf PA	
		Firm/ Company	
	13340 Pan	Bide Tell	
		, Address	
	(a pub lil	Address  City/ State and Zip Cod	3330
		City/ State and Zip Cod	c
<del></del> -	Carollatt 4 E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Caro 1	Lattout	at ( <u>954</u>	<u>5581128</u> de & Daytime Telephone Number
Name (	of Contact Person	Area Co	de & Daytime Telephone Number
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)
<u>Mai</u>	iling Address	Street	Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to

## Articles of Incorporation of

	of			
	attout, PA			
	s currently filed with the Florida Dept. of State			
+0x 5 D # 47-4	4272653/P15000 Number of Corporation (if known)	<u> 95</u>	000	<u>ッチ</u>
(Document I	Number of Corporation (if known)			
Pursuant to the provisions of section 607, 1006, Florida Statits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the f	ollowing	g ameno	dment(s) to
A. If amending name, enter the new name of the corpor	ration:			
name must be distinguishable and contain the word "c	PA		The	new
name must be distinguishable and contain the word "c "Corp.," "Inc.," or Co.," or the designation "Corp," "I word "chartered," "professional association," or the abbr	lnc," or "Co". A professional corporation name	the ab	brevia ontain	tion the
B. Enter new principal office address, if applicable:	same.			_
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>SS</u> )			
			<del></del>	<del>_</del>
C. Enter new mailing address, if applicable:	Same	(c)	2	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	3,,,,,,	<del>- 독교</del>	<del>- 3</del>	_
	<u></u>	<u>```أ`</u>	░	_ F }
		X:::	20	
D. 16		381	PM	
D. If amending the registered agent and/or registered o new registered agent and/or the new registered offic		امارات د تاری	:1	O
Name of New Projectured Agent		اري اري	<del>-</del>	
Name of New Registered Agent				
	(Florida street address)			
·				
New Registered Office Address:	(City), Florida	(Zip C	ode)	_
	<b>\</b>	( <b>,</b> -	,	
New Registered Agent's Signature, if changing Register				
I hereby accept the appointment as registered agent. I am	i familiar with and accept the obligations of the po	sition.		
Signature	e of New 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.

E	e, ana sa	uy smun, sv as an Aaa.	
Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).		
	<del></del>	
		· · · · · ·
· · · · · · · · · · · · · · · · · · ·		
f an amendment provides for an exch provisions for implementing the ame	ange, reclassification, or cance	llation of issued shares,
(if not applicable, indicate N/A)	MINERY IF INST COMMING IN THE	amenament usen.

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: 4/2//19 (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	e will not be fisted as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s by the shareholders was/were sufficient for approval.	•)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stateme must be separately provided for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(County group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	r
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 4/2//9	
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other cour appointed fiduciary by that fiduciary)	l
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	<del></del>
(Title of person signing)	
/ (Title of person signing)	