# P15000055425

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
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(Bu	siness Entity Nar	me)
(Do	cument Number)	
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# **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPO	RATION: Twin Lion Venture	es, Inc.	
DOCUMENT NUM	BER: P15000055425		
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Christine M. Montelione		
		Name of Contact Person	1
		Firm/ Company	
	1513 Hunters Mill Place		
		Address	
	Oviedo, Fl 32765		
		City/ State and Zip Code	e
cmo	ntelione@gmail.com		
<del></del>	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Christine M. Montel	ione	at (	608-3737
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check f	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)
Ms	ailing 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



(Name o		
(rturne o	f Corporation as currently filed with the	Florida Dept. of State)
15000055425		
	(Document Number of Corporation (if	known)
ursuant to the provisions of section 607.1 s Articles of Incorporation:	1006, Florida Statutes, this <i>Florida Profit C</i>	Corporation adopts the following amendment(s) to
. If amending name, enter the new na	me of the corporation:	
		The new
	ain the word "corporation," "company," ation "Corp," "Inc," or "Co". A profess ion," or the abbreviation "P.A."	
8. Enter new principal office address, i Principal office address <u>MUST BE A ST</u>	f applicable: FREET ADDRESS )	
Enter new mailing address, if applie		
(Mailing address <u>MAY BE A POST (</u>	<u>DFFICE BOX</u> )	
If amending the registered agent and new registered agent and/or the new	d/or registered office address in Florida, o	enter the name of the
	Christine M. Montelione	
	Christine W. Wolkeholie	
Name of New Registered Agent	1513 Hunters Mill Place	
	1513 Hunters Mill Place	. Florida 32765

# 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	John Doc	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	РТ	John A Paccione	1513 Hunters Mill Place
Add			Oviedo, FL 32765
X Remove			
2) Change	РТ	Christine M. Montelione	1513 Hunters Mill Place
X Add			Oviedo, FL 32765
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
,	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

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 file date	2)
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	ats, 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 the amendment by the shareholders was/were sufficient for approval.	nendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and action was not required.	shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and share action was not required.	eholder
Dated August 10, 2015	
Signature	
(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 court
appointed fiduciary by that fiduciary)	
John A. Vaccione	
(Typed or printed name of person signing)	
Theriday	
(Title of person signing)	