r	Florida Debartr ent of Store Binision of Congenerations Electronic Filing Cover Sheet
	Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.
	(((H17000153302 3)))
	Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.
	To: Division of Corporations Fax Number t (850)617-6380
	From: Account Name : FASTKIT CORP Account Number : 120100000009 Phone : (305)599-0839 Fax Number : (305)592-9591
	Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.
	Email Address: COR AMND/RESTATE/CORRECT OR O/D RESIGN
7 JUH - 7 PH 5: 00	Certificate of Status 0 Certified Copy 0 Page Count 04 Estimated Charge \$35.00
1- HAC 24	

1. FERMENX 101 08 2011

7/2017

۰.

ï,

.... , .

	ti n sonsati N	and the second s
		SFEDT JUN -7 P 1:
	Articles of Amendment	An etc.
	Articles of Incorporation	2217 JUN -7 D
	oſ	SEconaria I:
STATION MAINTENANCE, INC.		TALLAL ALLASTA OF COM
(<u>Name 6</u>) 5000057134	Corporation as currently filed with the f	TIGFINE Dept. of State
	(Document Number of Corporation (if I	(DANA)
	(Document Number of Colphylion (if a	urown <i>y</i>
rsuant to the provisions of section 607.19 Articles of Incorporation:	006, Florida Statutes, this <i>Florida Profit Ca</i>	prporation adopts the following amendment(
If smending name, enter the new nam	ie of the corporation:	
STATION OROUP INC me must be distinguishable and conta Corp., " "Inc.," or Co.," or the designal ord "chartered," "professional associati Enter new principal office address, if	npplicable:	The new or "incorporated" or the abbreviation onal corporation name must contain the
STATION OROUP INC me must be distinguishable and conta Corp., " "Inc.," or Co.," or the designal ord "chartered," "professional associati Enter new principal office address. If rincipal office address <u>MUST BE A ST</u>	tion "Corp." "Inc." or "Co". A profession on," or the abbreviation "P.A." <u>noplicable:</u> <u>REET ADDRESS</u>)	or "incorporated" or the abbreviation
STATION OROUP INC me must be distinguishable and conta Corp., " "Inc.," or Co.," or the designal ord "chartered," "professional association Enter new principal office address. If rincipal office address <u>MUST BEAST</u> Enter new mailing address, if applici	tion "Corp." "Inc." or "Co". A profession on," or the abbreviation "P.A." <u>noplicable:</u> <u>REET ADDRESS</u>)	or "incorporated" or the abbreviation
STATION OROUP INC Ime must be distinguishable and conta Corp., " "Inc.," or Co.," or the designal ord "chartered," "professional associati Enter new principal office address. If rincipal office address <u>MUST BE A ST</u> <u>Enter new mailing address. If applice</u> (Mailing address <u>MAY BE A POST O</u>	tion "Corp." "Inc." or "Co". A profession on," or the abbreviation "P.A." <u>npplicable:</u> <u>REET ADDRESS</u>) <u>able:</u> <u>FFICE BOX</u>) /ar registered office address in Florida, et	or "incorporated" or the abbreviation onal corporation name must contain the
STATION OROUP INC me must be distinguishable and conta Corp., " "Inc.," or Co.," or the designal ord "chartered," "professional associati Enter new principal office address. If rincipal office address <u>MUST BEAST</u> <u>Enter new mailing address</u> , if applics (Mailing address <u>MAY BEA POST O</u>	tion "Corp." "Inc." or "Co". A profession on," or the abbreviation "P.A." <u>npplicable:</u> <u>REET ADDRESS</u>) <u>able:</u> <u>FFICE BOX</u>) /ar registered office address in Florida, et	or "incorporated" or the abbreviation onal corporation name must contain the
STATION OROUP INC me must be distinguishable and conta Corp., " "Inc.," or Co.," or the designal ord "chartered," "professional associati Enter new principal office address. If rincipal office address <u>MUST BEAST</u> <u>Enter new mailing address. If applies</u> (Mailing address <u>MAY BEA POST O</u> <u>If amending the registered agent and</u> new registered agent and/or the new	tion "Corp." "Inc." or "Co". A profession on, " or the abbreviation "P.A." <u>npplicable:</u> <u>REET ADDRESS</u>) <u>able:</u> <u>FFICE BOX</u>) (ar registered office address in Florida, en registered office address;	or "incorporated" or the abbreviation onal corporation name must contain the
STATION OROUP INC me must be distinguishable and conta Corp., " "Inc.," or Co.," or the designal ord "chartered," "professional associati. Enter new principal office address, if rincipal office address <u>MUST BEAST</u> <u>Enter new mailing address, if applies</u> (Mailing address <u>MAY BEA POST O</u> . <u>If amending the registered agent and</u> new registered agent and/or the new	tion "Corp." "Inc." or "Co". A professio on," or the abbraviation "P.A." <u>npplicable:</u> <u>REET ADDRESS</u>)	or "incorporated" or the abbreviation onal corporation name must contain the

Signature of New Registered Agent, if changing

Page 1 of 4

If amonding 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X.Change	PT	John Dog	
X Remove	¥	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change			·····
Add			
Remove			
2) Change			
Add			
Remove			,
3) Change	<u></u>		
Add			<u> </u>
Remove			
4) Change			
Add			
Remove			
5) Change		19	
Add			
Remove			<u> </u>
ර) Change	<u></u>		·····
Add			<u></u>
Remove			•



E. <u>If amending or adding additional Articles, enter change(s) here:</u> (Attach additional sheets, if necessary). (Be specific) -----. . F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) _____ .

Page 3 of 4

The date of each amendment date this document was signed	06/06/2017 t(s) adoption:, if other than th
Effective date <u>if applicable</u> :	06/06/2017
Briterive date <u>ir appacadi</u> e.	(no more than 90 days after amendment file date)
	this block does not meet the applicable statutory filing requirements, this date will not be listed as th he Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
The amendment(s) was/war must be separately provide	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	
	(voiing group)
The amendment(s) was/wern action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were setion was not required.	e adopted by the incorporators without shareholder action and shareholder
06/06/	2017
Dated	KAP
sei	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
ab I	······································
ap,	ANISIO DOMINGUEZ
ap.	
۵p	ANISIO DOMINGUEZ

Page 4 of 4