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COVER LETTER

Division of Corpo	rations						
NAME OF CORPOR	ation: <u>Big</u> CH er: <u>PIS00605</u>	uy Auto's Co	οπρ				
DOCUMENT NUMB	ER:	1204					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.					
Please return all corres	pondence concerning this mat	tter to the following:	U				
-	Jereny Hol	Name of Contact Person					
-		Firm/ Company					
	1478 Riverplace Blub 1002 Address						
•		Address					
	Jacksonuil	e FL 32	2.07				
-	City/ State and Zip Code						
) holloway Tier 1 E-mail address: (to be us	P gmail · covered for future annual report	notification)				
	`	•					
For further information	concerning this matter, pleas	se call:					
Jeremy	Holloway	at (904	de & Daytime Telephone Number				
Name o	f Contact Person —	Area Co	de & Daytime Telephone Number				
Enclosed is a check 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)				
3.6 11		Ctmaat	Adduses				

Mailing Address

TO: Amendment Section

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

Street Address

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

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Articles of Amendment to Articles of Incorporation of

2015 AUG 24 PN 2: 25

SPORE (ARY DE S. A'E. PA. L. AHRRANDE P. BERNALL

	・無一、私門長さらいた。 日本計画店
(Name of Corporation	on as currently filed with the Florida Dept. of State)
(Docum	nent Number of Corporation (if known)
rsuant to the provisions of section 607.1006, Florida Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment
16di	o o
If amending name, enter the new name of the co	<u>n poration.</u>
me must be distinguishable and contain the word Corp.," "Inc.," or Co.," or the designation "Corp, ord "chartered," "professional association," or the	The new d "corporation," "company," or "incorporated" or the abbreviation," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
Enter new principal office address, if applicable rincipal office address <u>MUST BE A STREET ADD</u>	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u></u>
•	
new registered agent and/or registered new registered	red office address in Florida, enter the name of the office address:
Name of New Pagistared Agent	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida (City) (Zip Code)
	ů
w Registered Agent's Signature, if changing Reg	istered Agent:
nereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
Sign	nature 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.

<u>X</u> Change	PT John	Doe	o
X Remove	<u>V</u> <u>Mike</u>	<u> Jones</u>	D
X Add	SV Sally	· Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	Andrew Schmitt	1367 Munson Cove DR
Add			ATIANTIC BEACH FL
Remove			32233
2) Change	CEO	Jeremy Holloway	1478 Riverplace Blup 1002
X Add		·	Jacksonville FL 32207
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			a
5) Change			·
Add			
Remove			
6) Change			
Add			
Remove			

ttach add	litional	sheets, if	necessary)	. (Be sp	ter change(s pecific)				
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provision (if no	i <mark>s for in</mark> t applic	nplement able, indi	ing the an	rendment	if <u>not conta</u>	ined in t	ncellation of iss he amendment	itself:	
40	of	100	TOTAL	٠٠٠٠	40%	TO	Andrew	schmitt	
	of	100	TOTAL				Jeremy		4
			· · · · · · · · · · · · · · · · · · ·			-			U U
							8		
									

The date of cach amendment(s) adoption.	-/-/3	, if other than th
date this document was signed.		
Effective date if applicable:		
(no	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does not medocument's effective date on the Department of State	eet the applicable statutory filing requirements, this date version of the contract of the con	vill not be listed as th
Adoption of Amendment(s) (CHECK	<u>(ONE</u>)	а
The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro-	eholders. The number of votes cast for the amendment(s) eval.	·
	reholders through voting groups. The following statement up entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment	nt(s) was/were sufficient for approval	
by	." group)	
(voting g	(roup)	
☐ The amendment(s) was/were adopted by the board action was not required.	d of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted by the incoraction was not required.	porators without shareholder action and shareholder	
Dated 8-11-15		
Signature /		
(By a director, president	or other officer – if directors or officers have not been	
	ator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by the	hat fiduciary)	
Anven	Sch m TT ed or printed name of person signing)	
	ed or printed name of person signing)	
	(Title of person signing)	