P15000065206

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
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15 SEP 24 PM 2: 36

SEP J9 2015 CLEWIS



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 15, 2015

KENYA LEEKS / THE FIVE K INC. 106 DULVERTON WAY KISSIMMEE, FL 34758 US

SUBJECT: THE FIVE K INC. Ref. Number: P15000065206

We have received your document for THE FIVE K INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The amendment must be adopted in one of the following manners:

(1)If an amendment was approved by the shareholders, one of the following statements must be contained in the document.

(a)A statement that the number of votes cast for the amendment by the

shareholders was sufficient for approval, -or-

(b)If more than one voting group was entitled to vote on the amendment, a statement designating each voting group entitled to vote separately on the amendment and a statement that the number of votes cast for the amendment by the shareholders in each voting group was sufficient for approval by that voting group.

(2)If an amendment was adopted by the incorporators or board of directors without shareholder action.

(a)A statement that the amendment was adopted by either the incorporators or board of directors and that shareholder action was not required.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis Regulatory Specialist II

Letter Number: 215A00019427

COVER LETTER

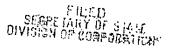
TO: Amendment Section Division of Corporations

NAME OF CORPO	The Five K Inc		•		
DOCUMENT NUMI	P15000065206				
The enclosed Articles	of Amendment and fee are su	abmitted for filing.			
Please return all corre	spondence concerning this ma	atter to the following:			
	Kenya Leeks				
		Name of Contact Perso	n		
	The Five K Inc.				
		Firm/ Company			
	106 Dulverton way				
	Address				
	Kissimmee Florida 34758				
		City/ State and Zip Cod	le		
Pin	k.68@live.com				
	E-mail address:	(to be used for future annua	al report notification)		
For further information	n concerning this matter, plea	se call:			
Kenya Leeks		407 at (401-9361		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Dep	artment of State:		
□ \$35 Filing Fee	E\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)		
	ling Address		Address		
Amendment Section		Amendment Section			
Division of Corporations		Division of Corporations			

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



15 SEP 24 PM 2: 36 (Name of Corporation as currently filed with the Florida Dept. of State) The Five K Inc. (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this *corporation* adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 106 Dulverton way B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Kissimmee FL 34758 C. Enter new mailing address, if applicable: 106 Dulverton way (Mailing address MAY BE A POST OFFICE BOX) Kissimmee FL 34758 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
l) Change	<u>v</u>	Ken lamont leeks	106 Dulverton way
X Add			Kissimmee FL 34758
Remove			
2) Change			
Add			and a second of the second of
Remove			
3) Change	·····		_
Add			·····
Remove			
4) Change			_
Add			
Remove			
5) Change			-
Add			
Remove			
6) Change	- 1 		···
Add			***
Remove			

If amending or adding additions (Attach additional sheets, if nece	ssary). (Be specifi	c)		
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	<u> </u>	 		
If an amendment provides for an	exchange, reclassif	ication, or cancells	ation of issued sha	res.
provisions for implementing the	amendment if not c	ontained in the an	nendment itself:	1 404
(if not applicable, indicate N/.	1)			
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The date of each amendment(s) ad	option:	, if other than
date this document was signed.	FILL	<u>t</u> ,
Effective date if applicable:	SEGRE IARY DIVISION OF OUR (no more than 90 days after amendment file date) 15 SEP 24	of shalf recordings
	15 SEP 24	PM 2: 3570
Adoption of Amendment(s)	[(CHECK-ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	sted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	The
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopt action was not required.	ted by the incorporators without shareholder action and shareholder	
[Dated	9/21/15	
Signature	Inch	
(By a di	ector, president or other officer – if directors or officers have not been	
	, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
_	KENYA LEEKS (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
_	DRESIDENT	
	(Title of person signing)	_