P15000080870

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	,	
		!

Office Use Only



300296251563

03/13/17--01045--006 **35.00



3/12/

COVER LETTER

ΤΟ: Amendment Section Division of Corporations

NAME OF CORPO	RATION: <u>Light</u>	weight flo	oning comp
	BER: P150000 8	J	
The enclosed Articles	of Amendment and fee are st	ubmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	Aa	non Hender	50 1
		Name of Contact Perso	n
	ught	weight Fiot	ning corp
		Firm/ Company	3
	82210	Gicrshwin	street
	_	Address	
	- 0 nc	ando, FL 32	
		City/ State and Zip Cod	e O
	E-mail address: (to be us	derson 191 @ sed for future annual report	icloud.com notification)
For further informatio	n concerning this matter, pleas	se call:	
Aaron	Henderson.	a _t (32	, 217-9570
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>	ling Address	Street	Address
	endment Section		ment Section
	sion of Corporations Box 6327		on of Corporations Building
=	ahassee, FL 32314		xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

(Name of Corporation as currently filed with the Florida Dept. of State)

PISM008087D

(Document Number of C	<u> </u>
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must confain the
B. Enter new principal office address, if applicable:	- Chi
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address	
new registered agent and/or the new registered office address:	in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	address)
New Registered Office Address:	. Florida
C	
New Registered Agent's Signature, if changing Registered Agent: 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:	ore, and camp onn	m, or as an maa.	
X Change	<u>PT</u> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	: Jones	
_X Add	SV Sally	Smith	•
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1)Change	M	Danny Everman	8226 Gershwin street onando, FL 32818
Remove			
2) Change			
Add			
Remove			
3) Change	**************************************		Souther the control of the Control o
Add			
Remove			
4)Change	•		
Add			
Remove			
5) Change	V 		
Add			
Remove	·		**************************************
6) Change	***************************************		
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself:

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 c	lays after amendment file date)
Note: If the date inserted in this block does not meet the applicab document's effective date on the Department of State's records.	ele statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The moby the shareholders was/were sufficient for approval.	umber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders throug must be separately provided for each voting group entitled to vot	h voting groups. The following statement e separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were s	ufficient for approval
by(voting group)	
☐ The amendment(s) was/were adopted by the board of directors wit action was not required. ☐ The amendment(s) was/were adopted by the incorporators without action was not required.	
Dated 2 2 2017	
Signature (By a director, president or other officer- selected, by an incorporator – if in the ha appointed fiduciary by that fiduciary)	
	enderson
(Typed or printed nam	ie of person signing)
Presid	lent-
(Title of p	erson signing)