

PI5000082089

11 NOV 15 1:32 PM JONES, FOSTER, 61 650-5353  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : JONES, FOSTER, JOHNSTON & STUBBS, P.A.  
Account Number : 076077003231  
Phone : (561)650-0471  
Fax Number : (561)650-5300

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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 PTD 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:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	<u>PD</u>	<u>ALLAN W. NYBORN</u>	<u>6760 EASTVIEW DRIVE</u>
			<u>LAKE WORTH, FL 33462</u>
	<u>Add</u>		
	<u>Remove</u>		
2) <input type="checkbox"/> Change	<u>S</u>	<u>TARA J. GONZALEZ</u>	<u>6760 EASTVIEW DRIVE</u>
			<u>LAKE WORTH, FL 33462</u>
	<u>Add</u>		
	<u>Remove</u>		
3) <input type="checkbox"/> Change	<u>T</u>	<u>JOHN A. NYBORN</u>	<u>6760 EASTVIEW DRIVE</u>
			<u>LAKE WORTH, FL 33462</u>
	<u>Add</u>		
	<u>Remove</u>		
4) <input type="checkbox"/> Change			
	<u>Add</u>		
	<u>Remove</u>		
5) <input type="checkbox"/> Change			
	<u>Add</u>		
	<u>Remove</u>		
6) <input type="checkbox"/> Change			
	<u>Add</u>		
	<u>Remove</u>		

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E. If amending or adding additional Articles, enter change(s) here:  
(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)

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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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) **(CHECK ONE)**

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided 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 \_\_\_\_\_"  
(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

NOVEMBER 11, 2015

Dated \_\_\_\_\_

Signature \_\_\_\_\_

*Allen W. Nyborn*  
(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)

ALLAN W. NYBORN

\_\_\_\_\_  
(Typed or printed name of person signing)

PRESIDENT

\_\_\_\_\_  
(Title of person signing)