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Amend

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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: Revive Holdings Inc. DOCUMENT NUMBER: PISOCOS 87691
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
JEFFERY REYNOLDS Name of Contact Person
Firm/ Company
· ·
13-B PONTE VEDRA COURT Address PONTE VEDRA FL 32082 City/ State and Zip Code
E-mail address: (To be used for future annual report notification)
For further information concerning this matter, please call:
JEFFERY REYNOLDS at 904, 514-6249 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

01	
Kevive Holdings	Inc 编版
	v filed with the Florida Dept. of State)
DIS 6666 9	71091
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or " word "chartered," "professional association," or the abbreviation"	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	13-B PONTE VEDEL COVE
(Principal office address MUST BE A STREET ADDRESS)	POTTE VEDRA FL 32082
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Po Box 17743 Jacksonville AL 32245
D. If amending the registered agent and/or registered office addr	ess in Florida, enter the name of the
new registered agent and/or the new registered office address	<u>:</u>
Name of New Registered Agent SEFFERY	K EY NOLDS
13-13 Pon	TE VEDRA COURT
	DRA Florida 32082 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent; I hereby accept the appointment as registered agent. Fun familiar v	
Some On Some West Land	saistored Jasm if changing

address of each Office (Attach additional shee Please note the officer $P = President; V = Vic Executive Officer; CF held, President, Treast Changes should be not a change, Mike Jones$	er and/or Dets, if necess director titl ce President (O = Chief I wer, Director ted in the for leaves the c	ary) e by the first letter of the office title: : T · Treasurer: S · Secretary: D= Director; TR - Tr Inancial Officer. If an officer director holds more th	ustee: C = Chairman or Clerk: CEO = Chief an one title, list the first letter of each office ST and Mike Jones is listed as the V. There is
Example: X Change	РТ	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	l
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change		JEFFERY REYNOLDS	Ponte Vedra FL
Remove			32082
2) Change			-
Add			
Remove			
3) Change			

,		
Remove		
3) Change		
Add		
Remove		
4) Change	 	
Add		
Remove		
5) Change		
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Remove		
6) Change	 	
Add		
Remove		_

	additional Articles, if necessary). (Be				
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an amendment provice provisions for implementations.	des for an exchango enting the amendm	e, reclassification, ent if not contains	or cancellation of ed in the amendme	issued shares, nt itself:	
(if not applicable, in	ndicate N A)				
					
				-	

$C_{1}/2C_{2}/27$	I
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 9/29/17	
(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 document's effective date on the Department of State's records.	I not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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	1
by	
☐ 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.	
Dated 9/29/17	
Signature (By a director, president or other officer – if directors or officers have not been	— ļ
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Deffery Reynolds (Typed or printed name of person signing)	
	l
1117	

(Title of person signing)