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Kinsey

COVER LETTER

TO: Amendment Section

Division of Corporations					
NAME OF CORPORATION: Craft TCD Consulting, Inc					
DOCUMENT NUMBER: PISODO 101 676					
The enclosed Articles of Amendment and fee are si	ubmitted for filing.				
Please return all correspondence concerning this ma	atter to the following:				
Trevor	Name of Contact Person				
_	Name of Contact Person				
Craft	TCD Consulting, lac Firm/Company Atlantic Ave #208 Address				
_	Firm/ Company				
<u> 3000 H</u>	O Atlantic Ave #208				
0	Bood G 7501				
	City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, plea	se call;				
Trever Doubly	321 2482-4732				
Name of Contact Person	at (<u>331</u>) <u>483-4732</u> Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made	payable to the Florida Department of State:				
\$35 Filing Fee \$\sum \\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & □S52.50 Filing Fee Certified Copy (Additional copy is enclosed) □S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)				
Mailing Address	Street Address				
Amendment Section	Amendment Section				
Division of Corporations	Division of Corporations				
P.O. Box 6327	Clifton Building				
Tallahassee, Fl. 32314	2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

Craft ICD Consi	olting Inc
(Name of Corporation as currently	filed with the Florida Dept. of State)
Pi5000101	c 76
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The con-
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.	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	2019 A
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	112: 0t
(Florida street	1 address)
New Registered Office Address:	Ftorida
	п,) (глр соае)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar with	th and accept the obligations of the position.
Signature of New Reg.	gistered 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.

X Change	<u>PT</u>	John I	loc	
X Remove	\underline{V}	Mike J	lones	
X Add	<u>sv</u>	Sally S	<u>Smith</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) Change	V	_	Jan Marie Dough	3000 N Atlantic Au
🗶 Add				मं अं ६
Remove				Cocca Beach, FC 32931
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
+ Right of Survivership Clause
If either Trever Doughty or Jan Marie Doughty
Should die all shares will pass to the
Surviving Shareholder. If both Trever DosiM
and Jan Marie Doughty die Hen all Thores
Should be passed to Melanie Jeanne Dought
Should be passed to melanie deave borgan
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)
New Shares holdings
Trever Doughly 50%
Jan Marie Doughy 50%

The date of each amendment(s) adoption:	_, if other than the
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 document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east 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 east 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.	
Dated 7/33/3018	
Signature	_
(By a director, president or other filter – 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)	
(Typed or printed name of person signing)	
Picsident	
(Title of person signing)	