P15000101859

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COVER LETTER

TO: Amendment Section

Division of Corpora	tions
NAME OF CORPORA	MON: ARROW RILEY INC. R: P 15000101859
DOCUMENT NUMBER	R: P 15000101859
The enclosed Articles of	Amendment and fee are submitted for filing.
Please return all correspo	ndence concerning this matter to the following:
	BRYAN W. STROB
	Name of Contact Person
	ARROW RILEY INC.
	15801 ARCHER ST.
	Address
	Huoson, FL 34667 City/State and Zip Code
	<i>y</i>
· · · · · · · · · · · · · · · · · · ·	BRYAN STROB & Yahoo . Com E-mail address: (to be used for future annual report notification)
For further information co	oncerning this matter, please call:
Lucy	FISH at 727 863-3404 Contact Person Area Code & Daytime Telephone Number
Fundament for the state of the	
Enclosed is a check for tr	ne following amount made payable to the Florida Department of State:
\$35 Filing Fee	Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Ameno Divisio P.O. B	g Address Iment Section on of Corporations ox 6327 cassee, FL 32314 Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle
	Tallahassee, FL 32301

Articles of Incorporation of

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

A. If amending name, enter the new nam	e of the corporatio	<u>n:</u>		_	_ , •	The nev
name must be distinguishable and contai "Corp.," "Inc.," or Co.," or the designati word "chartered," "professional associatio	ion "Corp;" "Inc,"	or "Co".	A profess			
B. Enter new principal office address, if a (Principal office address MUST BE A STR					<u> </u>	<u>, · </u>
						<u> </u>
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF						
		· · · · · · · · · · · · · · · · · · ·				
D. If amending the registered agent and/ new registered agent and/or the new in the n	or registered office ad registered office ad	<u>e address i</u> dress:	n Florida.	enter the	name of the	
Name of New Registered Agent	BRYA 15801 ARC	N S	TROP	3		······································
	15801 ARC	HER •	ST	Hups	ON, FL	34667
N n i i i i i i i i i i i i i i i i i i	317.197	,			. Florida	
New Registered Office Address: _		(City,) :		, Plotida_	(Zip Code)
New Registered Agent's Signature, If cha I hereby accept the appointment as register	red agent. I am fan	agent: viliar with t	and accept	the obliga	tions of the po	sition.
						

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors,	enter the title and nar	me of each officer/director being remove	d and title, name, and
address of each Officer and/or Director be			
(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	PT John Doe	
X Remove	V Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	P LOIS A. SNYDER	1241 HOLIDAY DR
Add		TARPON SPRINGS, FL 34689
Remove		34.689
2) Change	P BRYAN W. STROB	15801 ARCHER ST
Add		HUDSON, FL 34667
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
δ) Change		
Add		
Pamova		

ach <i>additioi</i>	nal sheets, if necessary). (Be specific)
•	
•	
 	
n smendm	ent provides for an exchange, reclassification, or cancellation of issued shares,
ovisions fo	r implementing the amendment if not contained in the amendment itself:
(if not ap	plicable, indicate N/A)
· · · · · · · · · · · · · · · · · · ·	
	

The date of each amendment(s) ado	NOVEMBER	0 11. 2011	n 1940. – Principalitika Maria di Partina di Pa	, l., Méis alahan dhan dh
date this document was signed.	ption: VIVIIII	<u> </u>	าวเจารายหากใช้เป	Historia dan da
Effective date <u>if applicable</u> :	NOVEMBER .			PM 1: 18
	, (no more than 90 d	lays after amendment file	aate)	
Note: If the date inserted in this blo document's effective date on the Department.		le statutory filing require	ements, this date will	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			•
The amendment(s) was/were adopt by the shareholders was/were suff		imber of votes cast for the	e amendment(s)	
☐ The amendment(s) was/were appromust be separately provided for ea				
"The number of votes cast fo	or the amendment(s) was/were s	ufficient for approval		
by	<u> </u>	,,,	.•	
	(voting group)			
The amendment(s) was/were adop action was not required.	ted by the board of directors wit	thout shareholder action a	and shareholder	
The amendment(s) was/were adop action was not required.	ted by the incorporators without	t shareholder action and s	shareholder	
Dated	111/2016			
Signature	10/			_
selected,	ector, president or other officer by an incorporator – if in the had d fiduciary by that fiduciary)			
арропце		SNYDER		
· · · · · · · · · · · · · · · · · · ·	(Typed or printed nan	ne of person signing)	and the second second	 -
: .	PRESIDE	أران المستعمل		

(Title of person signing)