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COVER LETTER

TO: Amendment S Division of Co			
NAME OF CORP	ORATION: CCE Services Inc	4.	
	MBER: P16000000018		
The enclosed Articl	les of Amendment and fee are s	ubmitted for filing.	
Please return all con	rrespondence concerning this m	atter to the following:	
	Steven L. Hearn		
		Name of Contact Perso	3m
	Steven L: Hearn, P.A.	or connect : crac	,
		Firm/ Company	
	PO Box 1192		
		Address	
	Tampa, FL 33601-1192		
		City/ State and Zip Coo	de
slh	@estatedisputes.com		
	E-mail address: (to be u	sed for future annual repor	t notification)
For further informat	ion concerning this matter, plea	se call:	
Steven L. Hearn		at (813	222-0003 ode & Daytime Telephone Number
Nam	e of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check	for the following amount made		
□ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status 2 Certified Copy (Additional Copy is enclosed)
Ar Di P.0	ailing Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Ameno Divisio Cliftor 2661 F	Address Iment Section on of Corporations Building Executive Center Circle

Articles of Amendment Articles of Incorporation

		of	
CCE Services Inc.			
(Name	of Corporation as curre	ntly filed with the Florida Dept. o	of State)
P1600000018		•	
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Statutes, th	is Florida Profit Corporation adop	ots the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associations of the control of t	nation "Corp." "Inc " or	"Co" A professional company	The new ted" or the abbreviation on name must contain the
B. Enter new principal office address,	if annlicable:	625 East Twiggs Street	
(Principal office address MUST BE A STREET ADDRESS)		Suite 102	
		Tampa, FL 33602	
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>	licable: OFFICE BOX)	PO Box 1192	
, ,		Tampa, FL 33601-1192	
D. If amending the registered agent ar new registered agent and/or the new Name of New Registered Agent	nd/or registered office ad w registered office addre Steven L. Hearn	dress in Florida, enter the name o	of the
The state of the s	625 E Twiggs St, Suite 1	02	
		street address)	
New Registered Office Address:	Tampa	•	33602
HEW HER SHELLEN OFFICE AUGUSTS.		(Ciny)	orida 33602 (Zip Code)
New Registered Agent's Signature, if c	hanging Registered Ages	nt:	
hereby accept the appointment as regist	tered agent. I am familiai	with and accept the obligations of	the position.
	Signature of New	Registered Agent, if changing	2017 FAC
			FIL TOEC 12
	Page	1 of 4	温 川

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, Sully 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: <u>X</u> Change	PT John	n <u>Doc</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>\$V</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	CEO	Steven L. Hearn	625 E. Twiggs St
X Add	i		Suite 102
Remove			Tampa, FL 33602
2) Change	ÇEO	Paul R. Lankford	4133 Causeway Vista Dr
Add			Tampa, FL 33615
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	. 1		
Remove			
6) Change	<u> </u>		
Add		·	
Remove			

	ting additional Articles, enter change(s) here: neets, if necessary). (Be specific)
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provisions for limbi	ovides for an exchange, reclassification, or cancellution of issued shares, ementing the amendment if not contained in the amendment itself: le, indicate N/A)
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Page 3 of 4

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 amendme	ent file date)
Note: If the date inserted in this block does not meet the applicable statutory filing a document's effective date on the Department of State's records.	requirements, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east by the shareholders was/were sufficient for approval.	for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. It must be separately provided for each voting group entitled to vote separately on the	The following statement c amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for appro	val
by(voting group)	."
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder a action was not required.	action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action action was not required.	n and shareholder
Dated	
Signature : All All	
By a director, president or other officer - if directors or of	
selected, by an incorporator — if in the hands of a receiver, appointed fiduciary by that fiduciary)	trustee, or other court
Steven I., Hearn	
(Typed or printed name of person signir	ng)
Curator (fiduciary) of the Estate of Paul R. Lankfo	rd
(Title of person signing)	