P16000001129

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: CAMILLE PROFI	ESSIONAL SERVICES IN	C	
DOCUMENT NUM	BER: P16000001129			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Jean Camille			
		Name of Contact Person	1	
	CAMILLE PROFESSIONAL	L SERVICES INC		
	2920 NW 56th ave	Firm/ Coropany		
		Address .		
	Lauderhill, FL, 33313	<u>. i</u>		
, on		City/ State and Zip Cod	e	
ieano	camille@live.com			
	E-mail address: (to be us	and for fishing amount amount	motification)	
	E-man address: (to be us	sed for fature annual report	nonneation)	
For further information	on concerning this matter, pleas	se call:		
•	the second second			
Jean camille		954 at.(,	3307938	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
		10		
■ \$35 Filing Fce	□\$43.75 Filing Fee & Certificate of Status		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ma	iling Address	Street	Address	
Mailing Address Amendment Section		Amendment Section		
	vision of Corporations	Divisio	on of Corporations	
P.O	D. Box 6327		Building	
Tal	lahassee, FL 32314		Executive Center Circle	
		- Tallah:	assee FI 32301	

Articles of Amendment to Articles of Incorporation of

(iname of C	Corporation as curre	ently filed with the	Florida Dept. of State)
:			
	(Document Number	er of Corporation (if	known)
annument on the annumbrane of continue (07 100	OC Florido Ctorritos d	nia <i>Elanida BuaceC</i>	
s Articles of Incorporation:	o, Fiorida Statutes, t	ms <i>Prortuu Proju</i> C	orporation adopts the following amendment(s
If amending name, enter the new name	of the cornerations		
Transcroung name, enter the new name	or the corporation.	•	
			The new
ame must be distinguishable and contain Corp.," "Inc.," or Co.," or the designation			
ord "chartered," "professional association			· ·
,	.,		
Enter new principal office address, if a			
Principal office address <u>MUST BE A STR</u>	<u>EEI ADDKESS</u>)	rs.	8
		• • • • • • • • • • • • • • • • • • • •	
. Enter new mailing address, if applicat	nle•		18 78
(Mailing address MAY BE A POST OF			30.2 m
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			enter the name of the
. If amending the registered agent and/o new registered agent and/or the new re			enter the name of the
			enter the name of the
new registered agent and/or the new re			enter the name of the
new registered agent and/or the new re	egistered office addi		enter the name of the
Name of New Registered Agent	egistered office addi	<u>-</u>	
new registered agent and/or the new re	egistered office addi	ess: a street address)	, Florida
Name of New Registered Agent New Registered Office Address:	egistered office addi	<u>-</u>	
Name of New Registered Agent	egistered office addi	ess: a street address)	, Florida
Name of New Registered Agent New Registered Office Address:	egistered office addi	street address) (City)	, Florida
new registered agent and/or the new re Name of New Registered Agent New Registered Office Address: ew Registered Agent's Signature, if chan	egistered office addi (Florida	a street address) (City)	, Florida(Zip Code)
Name of New Registered Agent New Registered Office Address:	egistered office addi (Florida	a street address) (City)	, Florida(Zip Code)
new registered agent and/or the new re Name of New Registered Agent New Registered Office Address: ew Registered Agent's Signature, if chan	egistered office addi (Florida	a street address) (City)	, Florida(Zip Code)

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.

Example: X Change	<u>PT</u>	John Doe		·
X Remove	<u>v</u>	Mike Jones		
_X Add	<u>sv</u>	Sally Smith	4,	
Type of Action (Check One)	<u>Title</u>	Name		Address
1) X Change	PC	Jean Camille		2920 NW 56th AVE
Add				Lauderhill, FL 33313
Remove			: .	
2) Change		·-	·	
Add			•	
Remove			r*:	•
3) Change				
Add				
Remove				1
4) Change				
Add				
Remove				
5) Change				
Add				
Remove		•	•	
6) Change				
Add				
Remove				

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	-		
			. ****	
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(6		ion, or cancellation of	issued shares,	
i an amenament provides for an exc	hange, reclassificati	ion, or cancemation of		
provisions for implementing the ame	hange, reclassificati endment if not cont	ained in the amendm	ent itself:	
provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassificati endment if not cont -	ained in the amendm	ent itself:	
provisions for implementing the ame	hange, reclassificati endment if not cont - -	ained in the amendm	ent itself:	
provisions for implementing the ame	hange, reclassification	ained in the amendm	ent itself:	
provisions for implementing the ame	hange, reclassification	ained in the amendme	ent itself:	
provisions for implementing the ame	hange, reclassification in the cont	ained in the amendme	ent itself:	
provisions for implementing the ame	hange, reclassification	ained in the amendme	ent itself:	
If an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification	ained in the amendm	ent itself:	

The date of each amendment(s) ac date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 doys after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
☐ The amendment(\$) was/were ado action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	opted by the incorporators without shareholder action and shareholder	
Doted 7	2/16/16.	
selected	director, president or other officer if directors or officers have not been ad, by an incorporator if in the hands of a receiver, trustee, or other court ited fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
a and a second of the contract	CEO presiden	<u> </u>
	/	

the

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