

P16000002713

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

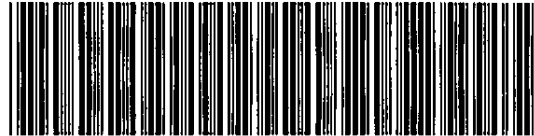
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500289210675

08/18/16--01025--007 **35.00

2015-08-17-16

3

~~AUG 23 2016~~
~~T. LEMMEIX~~

A handwritten signature in black ink, appearing to be "H. H." or similar, located at the bottom right of the page.

Amendment Section
Division of Corporations
PO Box 6327
Tallahassee FL 32314

Dear Sirs

Articles of Amendment filing for Fourteen IP, Inc

We enclose the Articles of Amendment to add Alan Poole as a director of Fourteen IP, Inc.

Should you have any queries please do not hesitate to contact Natasha Kirsten on 00 441942 364 573.

Yours faithfully



Fourteen IP, Inc

Articles of Amendment
to
Articles of Incorporation
of

FOURTEEN IP, Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

P16000002713

(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 its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

F. 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)
