(Requestor's Name) (Address) (Address)	90030700	)1909
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)	01/11.	71801010
(Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	S TALLENT JAN 1 2 2018	18 JAN 11
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: CONSIGNMENT RV & MAYING, INC.  DOCUMENT NUMBER: P1600004338
DOCUMENT NUMBER: P16000004338
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JERILIN A. Connetti Name of Contact Person
Firm/Company  19817 GUIF BIVA \$303  Address  Indian SHURES, FL 33785  City/State and Zip Code
Indian SHores, FL 33785
City/ State and Zip Code  Jeritan Connectification Com  E-mail-address: (to be used for future amoual report notification)
For further information concerning this matter, please call:
JERIUN A. Connetti at (104) 146 - 7237 Name of Contact Person Area Code & Daytime Telephone Number
•
Enclosed is a check for the following amount made payable to the Florida Department of State:    \$35 Filing Fee
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
ATTAChed: Name Change Mailing Address Change.

## Articles of Amendment to

## Articles of Incorporation

of

CONSIGNMENT RY & MArine INC.  (Name of Corporation as currently filed with the Florida Dept. of State)
(Name of Corporation as currently filed with the Florida Dept. of State)
P16000004338
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation
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)  19817 GUIF BIVE
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  19817 GUIF BIVA  Unit * 30 3  Indian Shores, FL 33785
D. If amending the registered agent and/or registered office address in Florida, enter the name of the
Name of New Registered Agent  Name of New Registered Agent
(Florida street address)
New Registered Office Address:, Florida
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing

address of each Officer (Attach additional sheet. Please note the officer/a P = President; V = Vice Executive Officer; CFO held. President, Treasur Changes should be note	and/or Director s, if necessary) lirector title by the President: T= T = Chief Financi er, Director would in the following waves the corpora	r being added:  e first letter of the office title:  reasurer: S= Secretary; D= Director; TR=  al Officer. If an officer/director holds more  ld be PTD.  manner. Currently John Doe is listed as the  tion, Sally Smith is named the V and S. These  h, SV as an Add.	Trustee; C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office PST and Mike Jones is listed as the V. There is a should be noted as John Doe, PT as a Change,
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action Check One)	Title	<u>Name</u>	<u>Addres</u> s
Add Remove	P 7 Addres	Jerilyn A. Connetti	19817 GUIF BIND * 303 Unit 303 Indian Shores FL
2) X Changer Add Remove	VP > Addres	MARK A. Connelli	33785 19817 GUIF Blyd Mnit 303 Indian Shoves FL
3 ) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add	<del></del>		

Remove

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)	
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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)	
ty not appreciate, tractic to A)	
	<u> </u>
	<u> </u>
	<u> </u>

The date of each amendment(s) ad	option: 01/09/18	, if other than the
date this document was signed.		1
Effective date <u>if applicable</u> :		<u> </u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	lock does not meet the applicable statutory filing requirements, to partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amend Ticient for approval.	  ment(s) 
	roved by the shareholders through voting groups. The following seach voting group entitled to vote separately on the amendment(s	
"The number of votes cast (	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shar	cholder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and sharehol	der
Dated 01/0	9/18	
Signature (By a di selected	rector, president or other officer – if directors or officers have not by an incorporator – if in the hands of a receiver, trustee, or other officery by that fiduciary)	
appoint	JERILIA A. Connetti	
•	(Typed or printed name of person signing)	
	Pres.	

(Title of person signing)