## P16000010888

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: BACK OFFICE B	USINESS SOLUTIONS O	F THE TREASURE COAST			
DOCUMENT NUM	BER: P16000010888					
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.				
Please return all corres	spondence concerning this ma	tter to the following:				
	Janice Mueller					
		Name of Contact Person	1			
	Back Office Solutions of the Treasure Coast, Inc.					
	<u> </u>	Firm/ Company				
	P.O. Box 780242					
		Address				
	Sebastian FL 32978-0242					
		City/ State and Zip Code	2			
backo	fficetc@yahoo.com					
	<del>-</del> ·	sed for future annual report	notification)			
For further information	concerning this matter, pleas	se call:				
Janice Mueller		at (	205-5302			
Name o	of Contact Person	· Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment of State:			
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle			

Tallahassee, FL 32301

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### Articles of Amendment to Articles of Incorporation of

BACK OFFICE BUSINESS SOLUTIONS OF THE TREASURE COAST, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P16000010888 (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: BACK OFFICE SOLUTIONS OF THE TREASURE COAST, INC. 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 confain the professional association " or the abbreviation "P.A." 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: P.O. Box 780242 (Mailing address MAY BE A POST OFFICE BOX) Sebastian, FL 32978-0242 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: Florida 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

## 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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change		·		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				_ <del></del> ,
5) Change				
Add		_		
Remove				
Komo yo				<del></del> -
6) Change	<del></del>	_		
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)					
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f an amendment provides for an exch	ange, reclassifi	cation, or car	cellation of	ssued share	<u>:S4</u>	
provisions for implementing the ame (if not applicable, indicate N/A)	nd <u>me</u> nt if not c	ontained in the	<u>ie amendme</u> i	<u>it itself:</u>		
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·· <del></del>						
			<u></u> -			

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	t
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
2/17/16 Dated	
Signature Sanice Mueller	
(By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Janice Mueller	
(Typed or printed name of person signing)	
President	
(Title of person signing)	