

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(eny enderzijan nene ny
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100302280261

08/11/17--01008--007 \*\*43.75

AUG 1 8 2017 S. YOUNG



## **COVER LETTER**

TO: Amendment Section

Division of Corporati	ons		
NAME OF CORPORAT	ION: Indes	com, Inc	
DOCUMENT NUMBER		l l	
The enclosed Articles of A	mendment and fee are sul	bmitted for filing.	
Please return all correspon	dence concerning this mat	tter to the following:	
	Da	n Schuman	
		Name of Contact Person	1
	Ind	lesom Inc.	
		lesom Inc. Firm/Company	
	1321	Sand Castle	Rd.
		Address	
	Sər	ibel, FL 339	57
-		City/ State and Zip Cod	
	acol	nimo@gmail.com	n
		ed for future annual report	
		ou to total o ambai topott	,
For further information co	ncerning this matter, pleas	se call:	
Dan Sc.	human	at ( 571	249 - 8449 de & Daytime Telephone Number
Name of C	ontact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	e following amount made p	payable to the Florida Depa	artment 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		Amend	Address Iment Section on of Corporations
P.O. Bo	x 6327	Clifton	Building
Tallahas	see, FL 32314		executive Center Circle essee, FL 32301
		iditatia	1330C, I L J2JVI

## Articles of Amendment

## Articles of Incorporation

Indexo	n = (n)					
P16000013	Corporation as currently	filed with the Florida Dept	of State)			
11700	(Document Number of	Corporation (if known)				
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this I	Florida Profit Corporation ad	opts the follo	wing	amend	ment(s) to
A. If amending name, enter the new nar	ne of the corporation:			(Ve	cr90	، ۶ ۲۰۵۲)
		Veer 90 In	١.		The n	
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associati	tion "Corp," "Inc," or "C	Jo". A professional corpora		e abb	breviati	ion
B. Enter new principal office address, if (Principal office address MUST BE A ST		NA				<u>-</u>
						_
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		NA			<del></del>	-
				<u>.</u> ;	1.05	- , 
D. If amending the registered agent and			e of the	•	.~;	- ;
new registered agent and/or the new	registered office address:		<u> </u>		بي	
Name of New Registered Agent	MA		<u>i:</u>	 	62)	
-	(Florida stre	ret address)				
New Registered Office Address:			Florida			_
	•	(City)	(	7ір Со	rde)	
New Registered Agent's Signature, if ch. I hereby accept the appointment as registe.			s of the positi	on.		
NA	Simulation EV C	egistered Agent, if changing				
	Menature of New Re	vinieten Ageni. II 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	NA		
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add	<u></u>		
Remove			
4) Change	<del>_</del>	_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ΛA	l sheets, if necesso	ury). (Be specific	ange(s) here: )			
/\: <del> </del>						
/V/\_						
			<del></del>	<del></del>		
		<del></del>				
<del></del>	<del></del>				<del></del>	
			<u> </u>		<del></del>	
	•					
			ification or cone	allation of iccurd	charac	
f an amendmen	t provides for an	exchange reclace	nication, or cane			
	t provides for an			amendment itself	<u>[:</u>	
provisions for i		amendment if not		amendment itself	<u>[:</u>	
provisions for i (if not appli	mplementing the	amendment if not		amendment itself	<u>r.</u>	
provisions for i	mplementing the	amendment if not		amendment itsel	<u> </u>	
provisions for i (if not appli	mplementing the	amendment if not		amendment itsel	<u></u>	
provisions for i (if not appli	mplementing the	amendment if not		amendment itsel	<u></u>	
provisions for i (if not appli	mplementing the	amendment if not		amendment itsel	<u></u>	
provisions for i (if not appli	mplementing the	amendment if not		amendment itsel	<u>.                                    </u>	
provisions for i (if not appli	mplementing the	amendment if not		amendment itsel	<u>F.</u>	
provisions for i (if not appli	mplementing the	amendment if not		amendment itsel	<u> </u>	
provisions for i (if not appli	mplementing the	amendment if not		amendment itsel	<u> </u>	
provisions for i (if not appli	mplementing the	amendment if not		amendment itsel	<u>F.</u>	
provisions for i (if not appli	mplementing the	amendment if not		amendment itself	<u> </u>	

The date of each amendment(s) adoption:	, 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.	ate 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( by the shareholders was/were sufficient for approval.	s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statements that the separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	er
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 8/8/17 Signature Aug.	
(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 courappointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	