## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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Division of Corporations

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Account Name : SMALL BUSINESS RESOURCES USA, INC.

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Tallahassee, FL 32314

# FAX AUDIT H16000 293434

#### COVER LETTER

TO: Amendment Section Division of Corporations Schmidt Built Properties, Inc. NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: James K. Duerr, CPA Name of Contact Person Small Business Resources USA, Inc. Firm/ Company 1601 Park Center Dr., Ste. 6A Address Orlando, FL 32835 City/ State and Zip Code JimD@sbrorlando.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: James K. Duerr, CPA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee \$43.75 Filing Fee & **□\$43.75** Filing Fee & S52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

SBR

FAX AUDITH H 16 000 293 4343

Articles of Amendment to Articles of Incorporation of

(Name)	of Corporation as carrent	le filed with the Florida Dept. of State)	
16000017185		THE THE PARTY OF T	
***************************************	(Document Number c	of Corporation (11 known)	
tursuam to the provisions of section 607. 8 Articles of incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the fullnwing amendment(s) to	
. If awending name, enter the new po	ime of the corporation:		
Joodbay House, Inc.		The new	
ome must be distinguishable and con Corp.," "Inc.," w Co.," or the design ord "cluwered." "professional associa	ation "Carp." "Inc." ar	m," "company," or "incorparated" or the abineviation Co". A professional corparation came must contain the	
i. Enter new principal office address,	if annicable:	2014 Edgewater Dr., Ste. 157	
Principal office uddress MUST NE A 5	TREET ADDRESS )	Orlando, FL 32804	
. Enter new mailing address, if annii	entrie:		
(Mailing address MAY BE A POST)		2014 Edgewater ffr., Stc. 157	
		Orlando, FL 32804	
. If amending the registered agent an	d/or registered office add	ress in Florida, enter the name of the	
new registered agent and/or the new		<del>-</del>	
Name of New Registered Agent	Wylie & Associates, LLC		
	1601 Park Center Dr., Ste.	6A	
	•	wei address)	
	Orlando	, Florida 32X35	

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FAX AUDITH H 1600043 4343

## FOX AMONT # H160000934343

. 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 udditional 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	PT	John Doe			
X Remove	$\underline{\mathbf{v}}$	Mike Janes			
<u>X</u> Add	<u>sy</u>	Sally Smith			
Type of Action (Check One)	Title	Name	Address		
J) X Change	Р,Т	Schmidt, Timothy R	2014 Edgewater Dr.		
Add			Ste. 157		
Remove			Orlando, Fl. 32804		
2) X Change	VP,S	Schmidt, Lisa L.	2014 Edgewater Dr.		
Add			Ste. 157		
Remove			Oriando, FL 32804		
3) Change					
Add					
Remove					
4) Chenge					
Add					
Remove					
5)Change	<del></del>				
Add					
Reniove					
6) Change					
Add			Appared to the second s		
Remove					

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# FAX AUDIT # H16000 243434 3

E. If amending or (Attach additional	adding additional Art il sheets, if necessary).	(Ba specific)	s) here:		
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. If an amendmen provisions for i	t provides for an exch	<u>ange, reclassificatio</u> adment if not conta	on, or cancellation	n of issued shares, dment itself:	
(if not appli	mp)ementing the americable, indicate N/A)				
		<del></del>		<del></del> ,	
				<del></del>	
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immediately.
The date of each amendment(s) adoption:
Effective date if mplicable:
(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 will not be listed a document's effective date on the Department of Sixte's records.
Adaption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes east 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 emitted to vote separately on the amendment(s):
The number of votes cast for the amendment(s) was were sufficient for approval
by
by
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 netion was not required.
November 29, 2016 Dated
Signature Integrale
(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 apparatual fiduciary by that fiduciary)
Timothy R. Schmidt
(Typed of printed name of person signing)
President
(Title of person signing)

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