## P140000/8/83

(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·		
(Ac	(Address)			
(Ad	ddress)			
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<b>(B</b> )	usiness Entity Na	me)		
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: HOOKS AND HO	RNS INC	
DOCUMENT NUMB	ER: P16000018183	<del> </del>	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	condence concerning this mat	tter to the following:	
]	MICHAEL KIGHT		
-		Name of Contact Persor	1
1	HOOKS AND HORNS INC		
-		Firm/ Company	
	12542 PERCY LANE		
<del>-</del>		Address	
	JACKSONVILLE, FL. 32218	8	
-		City/ State and Zip Code	2
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
MICHAEL KIGHT	-		294-7628
	f Contact Person	at (904	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	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)
Ame Divis P.O.	ling Address Indment Section Ission of Corporations Box 6327 Islansee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations a Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

HOOKS AND HORNS INC

2018 AUG -8 AM 8: 47

to

(Name	of Cornoration as curren	tly filed with the Florida Dept. of State)
P16000018183	or corporation as curren	sty med with the riorida Depth of State
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendmen
A. If amending name, enter the new na	ame of the corporation:	<i>Til.</i>
	nation "Corp," "Inc," or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable:	N/A
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A
D. If amending the registered agent an new registered agent and/or the ne		
Name of New Registered Agent	N/A	
		·
	·	street address)
New Registered Office Address:	N/A	, Florida
		(City) (Zip Code)
New Registered Agent's Signature, if call the second second the appointment as registered.		nt: r with and accept the obligations of the position.
<del></del>	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 De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	V		CHISTIAN VADEN	35171 GOODBREAD RD.
X Add				CALLAHAN, FL. 32011
Remove				
2) Change		<del></del>		
Add				
Remove				
3) Change		<del></del>		<del></del>
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		<del></del>		
Add				
Remove				

(Attach	ling or adding additional Articles, enter change(s) here: dditional sheets, if necessary). (Be specific)
A	
	<del></del>
· .	
<u>.</u>	
If an ar	endment provides for an exchange, reclassification, or cancellation of issued shares, ons for implementing the amendment if not contained in the amendment itself:
(if	not applicable, indicate N/A)
A	

The date of each amendment date this document was signed	at(s) adoption:	, if f it t	other than the
	JULY, 22, 2016	SECRETARY DIVISION OF CO	OF STATE
Effective date if applicable:	(no more than 90 days after amendment file date)	PATION OF CO	REURAHGN
	(no more than 90 days after amendment file date)	2016 AUG -8	AM 8: 48
	this block does not meet the applicable statutory filing requirements, the Department of State's records.	his date will not b	pe listed as the
Adoption of Amendment(s)	(CHECK ONE)		
	ere adopted by the shareholders. The number of votes cast for the amendavere sufficient for approval.	ment(s)	
	ere approved by the shareholders through voting groups. The following solded for each voting group entitled to vote separately on the amendment(s)		
"The number of vote	es cast for the amendment(s) was/were sufficient for approval		
by	(voting group)		
	(voting group)		
☐ The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and share	eholder <sub>.</sub>	
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and sharehold	der	
	Y 22, 2016		
Signature _	Michael Bight  By a director, president or other officer – if directors or officers have not	1	
	selected, by an incorporator – if in the hands of a receiver, trustee, or other		
	appointed fiduciary by that fiduciary)		
	MICHAEL KIGHT		
	(Typed or printed name of person signing)		<del></del>
	PRESIDENT		
	(Title of person signing)		<del></del>