## P16000019112

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Special Instructions to Filing Officer:  Mr. Shields Wanted  Li see attachment 1  removed from page 3,

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V HERRING MAR 1 5 2017

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATI	ON:N.N.J	E., INC.	
DOCUMENT NUMBER:	P160000	019112	
The enclosed Articles of An	nendment and fee are sub	omitted for filing.	
Please return all correspond	ence concerning this mat	ter to the following:	
	LES C.	SHIELDS, ESQ.	
		Name of Contact Person	1
	MORRIS	& SHIELDS	
		Firm/ Company	,
<del></del>	685 RO	YAL PALM BEACH BL Address	VD. SUITE 205
	ROYAL	PALM BEACH, FL 33	411
		City/ State and Zip Cod	e
	TERREE	SHIELDS@aol.com	
	E-mail address: (to be us	ed for future annual report	notification)
For further information con	cerning this matter, pleas	e call:	
LES C. SHIELD	S. ESO.	at ( <u>561</u>	) 793-1200
Name of Co	ntact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check for the	following amount made p	payable to the Florida Dep	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)
Division P.O. Box	ent Section of Corporations	Amen Divisi Clifto	Address dment Section on of Corporations n Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILES TESTARY OF STATE TYTSON OF CORPORATION

2017 MAR 13 PM 2: 26

	per of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes,	• • •		
ı	this Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation	<u>ı:</u>		
	The new		
name must be distinguishable and contain the word "corpor" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviate	or "Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable:	15505 82ND STREET		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	LOXAHATCHEE, FL 33470		
C. Forton or an III.			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	15505 82ND STREET		
	FOX		
	LOXAHATCHEE, FL 33470		
D. If amending the registered agent and/or registered office and new registered agent and/or the new registered office add			
IFS C	SHIELDS, ESQUIRE		
Name of New Registerea Agent	YAL PALMEBEACH BLVD, SUITE 205		
	ROYAL PALM BEACH, FL 33411		
(Florid	la street address)		
New Registered Office Address:	, Florida		
THE TROUBLE CONTINUE TRANSPORTER	(City) (Zip Code)		

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 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>	<u>Addres</u> s
1) Change		NICK MASSIMO	18602 91ST PLACE N.
Add			LOXAHATCHEE, FL 33470
x Remove			
2) Change		EDWARD HAMPSON	15505 82ND STREET
X Add			LOXARATCHEE, FL 33470
Remove			
3 ) Change	-		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Pomovo			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
OWNERS OF 67 OUT OF 100 SHARES NICK MASSIMO AND NOREEN MASSIMO SOLD AND/OR		
TRANSFERRED ALL OF THEIR SHARES TO OWNER OF 33 OUT OF 100 SHARES EDWARD HAMPSON,	03.	27:
ON 2/3/17, EDWARD HAMPSON NOW OWNS 100 OUT OF 100 SHARES AND IS THE SOLE		
OWNER, DIRECTOR, OFFICER.		
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)		

The date of each amendment(s) as date this document was signed.	pption:, if other than
Effective date <u>if applicable</u> :	2/3/17
	(no more than 90 days after amendment file date)
Note: If the date inserted in this bedocument's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not be listed as a partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were su	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.
	oved by the shareholders through voting groups. The following statement ach 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.	ted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado action was not required.	ted by the incorporators without shareholder action and shareholder
Dated 2/3/1	
Signature	Cal Haysun
(By a di	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
	EDWARD HAMPSON (Typed or printed name of person signing)
	PRESIDENT
•	(Title of person signing)