P16000022526

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COVER LETTER

Division of Corporations				
NAME OF CORPORATION: S.A. L. TINOUSTRIES, INC. DOCUMENT NUMBER: P16000022526				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Name of Contact Person S.A.L.T FINDUSTRIES, INC Firm/ Company 10927 Whit/ Ct Address Dackson Ville FL 32246 City/ State and Zip Code SALT IN DUSTRIESTIVE & Gran, 1. Com E-mail address: (to be used for future annual report-notification)				
For further information concerning this matter, please call:				
Sesse 5. Koyciak at (904), 625-7537 Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed)				

Mailing Address

TO: Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

to

	115 VTO T.C.	Tule	
	VOUSTRIES tion as currently filed with the		
(Ivame of Corporat			
(0		022526	
(Docu	ment Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	da Statutes, this <i>Florida Profit C</i>	Corporation adopts the fol	llowing amendment(s
A. If amending name, enter the new name of the c	corporation:		
S.A.L.T. I	N DUSTRTES. T	-NC.	The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	p," "Inc," or "Co". A profess	or "incorporated" or ional corporation name	the abbreviation must contain the
B. Enter new principal office address, if applicable	<u></u>		
(Principal office address <u>MUST BE A STREET AD</u>	DRESS)		. 55 <u>5</u>
		· · · · · · · · · · · · · · · · · · ·	第三世
C. Enter new mailing address, if applicable:			でいた
(Mailing address MAY BE A POST OFFICE B	<u>ox</u>)		海安全
			2 20 20
			9 45 145
			
D. If amending the registered agent and/or registered new registered agent and/or the new registered.		enter the name of the	
	o office address.		
Name of New Registered Agent			
			
	(Florida street address)	•	
New Registered Office Address:		, Florida	7: 0 1
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Re	egistered Agent:		
I hereby accept the appointment as registered agent.		the obligations of the pos	ition.
Sia	nature of New Registered Agent.	if changing	
DIE .	received to the later to the following the later the lat	· ·/ ~/···/////////	

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: XChange	PT Joi	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change		Tiffany M. Korycink	10927 Whitly ct
Add			Sacksonville FL 3248
Remove			
2) Change	5	William M. Miller	1604 Ponter Lakes Or
\mathcal{X} Add			Jacksonville FL 32218
Remove			
3) Change			
Add			<u> </u>
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Ariticle of Name: change the NAME From /WAS
S. A. L. T INDUSTRIES INC. / U. thonly 3 Dot's
IN S.A.L.T
TO / New & S. A. L. T. INDUSTRIES, INC.
With 4 Dots in S.A.L.T.
Aritcle of New Officers And Shore's
Jesse J. Koyrick P. President 600 Shares
10927 whitly ct. Jacksonville FL 32246
Tissany M. Koryelik V Vice President 350 Shure's
10927 whitly CT. Joeksonville, FL 32246
William M. Miller S Secretary 50 stores
10927 whitly ct. Jacksonville FL 32246 William M. Miller S Secretary 50 Share'S 1604 Porter Lokes Or. Jacksonville FL 32218
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)
Jesse J. Konyciak P 600 Shares
Tildery M. Koryciak V 350 Shares
William M. Miller S 50 Shares

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amend	ment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	g requirements, this date 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 can by the shareholders was/were sufficient for approval.	ast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. must be separately provided for each voting group entitled to vote separately on the separately of the separat	
"The number of votes cast for the amendment(s) was/were sufficient for app	roval
by	, si
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholde action was not required.	r action and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder act action was not required.	ion and shareholder
Dated 3/24/2016 Signature	
Signature (By a director, president of other officer – if directors or selected, by an incorporator – if in the hands of a received appointed fiduciary by that fiduciary)	
(Typed or printed name of person sign	orycial
(1 yped or printed name of person sign	ning)
President (Title of person signing)	<u></u>
(Title of person signing)	