## P160000028848

(Re	questor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	of Status
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## **COVER LETTER**

For further information concerning this matter, please call:

\$35 Filing Fee

TO: Amendment Section

B.P. Maricid at (985) 974-5829

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:

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□\$43.75 Filing Fee & Certificate of Status

Certificate of Status

Certified Copy
(Additional copy is enclosed)

□\$52.50 Filing Fee & Certificate of Status
Certified Copy
(Additional Copy

Mailing Address

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

Amendment Section
Division of Corporations
Clifton Building

Street Address

is enclosed)

2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment** Articles of Incorporation

Aiuci	ت. د د د د د د د د د د د د د د د د د د د
	to s of Incorporation of  LS /V   urrently filed with the Florida Dent of State)
Articles	s of Incorporation
	- of
SUSA FUE.	15 146
(Name of Corporation as cu	urrently filed with the Florida Dept. of State)
4	
P 16 00003	<u> </u>
(Document Nur	mber of Corporation (if known)
rsuant to the provisions of section 607.1006, Florida Statute Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s
If amending name, enter the new name of the corporati	ion:
SIGHT USA 1	The new poration," "company," or "incorporated" or the abbreviation
me must be distinguishable and contain the word*"corp. Corp.," "Inc.," or Co" or the designation "Corp," "Inc, ord "chartered," "professional association," or the abbrevi	" or "Co". A professional corporation name must contain the
Enter new principal office address, if applicable:	362 GULF BREEZE PKWY #242 GULF BREEZE PKWY, FL 3256
rincipal office address <u>MUST BE A STREET ADDRESS</u> )	) CUIS 22522 OF FL 3276
	GULF BREEZE FREY, TL 3236
	•
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	Same as About
making duaress MIT BE IT TOST OF FICE BOX	3000 2
	<del></del>
If amending the registered agent and/or registered office	
new registered agent and/or the new registered office a	ddress:
Name of Name Bankstone I America	1/1
Name of New Registered Agent	
•	
(Flo	orida street address)
(110	
New Registered Office Address:	, Florida
	(City) (Zip Code)
w Registered Agent's Signature, if changing Registered	Agent:
ereby accept the appointment as registered agent. I am fai	miliar with and accept the obligations of the position.

Page 1 of 4

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 Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
l) Change	-	_		
Add				
Remove				
2) Change				
Add		_		
Remove				
3 ) Change				
Add		_		
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4) Change		_		
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5) Change	<del>.</del>	_		<u> </u>
Add				
Remove				
6) Change		<del>-</del>		
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Attach additional sheets, if necessary).	(Be specific)	(s) here:		
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f an amendment provides for an exch provisions for implementing the ame	ndment if not con	tion, or cancellat	<u>ion of issued shar</u> endment itself:	<u>es.</u>
(if not applicable, indicate N/A)		· · · · · · · · · · · · · · · · · · ·		
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The date of each amendment(s) adopt late this document was signed.	ion:2/07//7	, if other than the
Effective date <u>if applicable</u> :	2-107 / 7 (no more than 90 days after amendment file	e date)
Note: If the date inserted in this block document's effective date on the Depart	t does not meet the applicable statutory filing requirement of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes cast for the the for approval.	he amendment(s)
	ed by the shareholders through voting groups. The fo h voting group entitled to vote separately on the ame	
"The number of votes cast for	he amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and	shareholder
Dated 2	P. Mars	
(By a direct selected, by	or, president or other officer – if directors or officers an incorporator – if in the hands of a receiver, truste iduciary by that fiduciary)	
	B.P. Maricle	
<del>_</del>	(Typed or printed name of person signing)	·····
	Passion /cso (Title of person signing)	
	(Title of person signing)	