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(Red	questor's Name)	
(Add	dress)	
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<u></u>	WAIT	, MAIL
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORAT	rion:	TALLAHASSEE	Company	<u>Co</u> .		
DOCUMENT NUMBER	₹:	P160000344	F78			
The enclosed Articles of A	Amendment and fee are	submitted for filing.				
Please return all correspor	ndence concerning this i	matter to the following:				
	•	LADY KEEN	c ·			
		Name of Contact Pe	rson			
		TAWAHASS	_ 	Y CO.		
		PN19 HPM		MAY		
		Address				
	THUAHASSEE TL, 32311					
_	City/ State and Zip Code.					
		doctint @	2 amout c	M		
	E-mail address: (to be	used for future annual rep	oort notification)			
د امود		•		³ ~ ~'		
For further information co	encerning this matter, pl	ease call:		,		
LAOX	Kealo	at (S)	D, DRU E	1720		
Name of C	Contact Person	Area	Code & Daytime Teleph	ione Munher		
Enclosed is a check for th	e following amount ma	de payable to the Florida D	Department of State:			
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status		Certificate of Sta	atus ·		
	g Address ment Section	·	eet Address lendment Section			

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to Articles of Incorporation of

TALAHARSEE (Company Co.	
(Name of Corporation as currently filed with the Flor	ida Dept: of State)	
P1400007447	K	•
(Document Number of Corporation (if kn	nown)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Articles of Incorporation:	orida Profit Corporation adopts the following	amendment(s) to
A. If amending name, enter the new name of the corporation:		Tr.
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P.A	"company," or "incorporated" or the about. A professional corporation name must contain.	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	TAWAHARCE TO 023	
·	1.1001M1 32 60 110 721	
		<u> 22</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		ORETA CAHAS
		馬里 🗲 [
		AH 6: CFICE
35 35 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	. Named and the second second	Ser Services
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	S IN Progress, Enter the Range of the	Z, 3
Name of New Registered Agent		•
(Florida street	address)	
New Registered Office Address:	, Florida(Zip Code)	
(City)	(Zip Coue)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.	
>		,
Signature of New Registered Age	ent 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	PT	John De	<u>oe</u>				•
X Remove	<u>V</u>	Mike Jo	ones .	. ·			
X Add	<u>sv</u>	Sally S	<u>mith</u>			,	
Type of Action (Check One)	Title		Name		<u>Addres</u> s		,
1) Change	<u>D</u>		TRAVIS	w. Keels	3419	Apaladue ahawee 72	Akuy
Add				•	fall	ahauee 7	し,327
Remove							
2) Change						·	,
Add			·	-			
Remove		:	•	•			
3) Change		-			<u>*</u>	<u> </u>	
Add .		; ·	. '	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 	<u></u>	<u> </u>	
Remove							
4) Change							
Add					<u> </u>		
Remove							•
5) Change							
Add							
Remove							
6) Change		_			····		
Add						,	
Remove							

Attach additional sheets, if necessary).	cles, enter change(s) (Be specific)			
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f an amendment provides for an excl	nange, reclassification	i, or cancellation of	ssued shares,	•
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contain	<u>ied in the amendme</u> i	<u>it itself:</u>	
		- 		
			· · · · · · · · · · · · · · · · · · ·	
•				

The date of each amendment(s) ad	option;	, if other than the
date this document was signed.		
Effective date if applicable:		,
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the sharcholders was/were su.	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement each 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	,,	
	(voling group)	
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder	
•	07. de. 26/16	
⊸S.gnature		_
gelected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court seed fiduciary by that fiduciary)	
	TRAJIS Keels	_
	(Typed or printed name of person signing)	-
	Directol	

(Title of person signing)