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JUN 08 2016 K. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: JRL INDUSTRI	ES, INC.				
DOCUMENT NUMBER: P16000035586					
The enclosed Articles of Amendment and fee are s	submitted for filing.				
Please return all correspondence concerning this m	natter to the following:				
Kim Stanfield					
	Name of Contact Person				
The Hogan Law Firm					
	Firm/ Company				
20 So. Broad Street					
	Address				
Brooksville, FL 34601					
	City/ State and Zip Code				
kstanfield@hoganlawfirm.com					
- -	used for future annual report notification)				
,	,				
For further information concerning this matter, ple-	ase call:				
Kim Stanfield	352 799-8423				
Name of Contact Person	at () Area Code & Daytime Telephone Number				
rame of contact reison	Area code & Daytine Telephone Humber				
Enclosed is a check for the following amount made	e payable to the Florida Department of State:				
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address 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

16 JUN -6 AH 10: 26

SECRETALIY DE L'AYE MELAHADDET PLUNDA

JRL INDUSTRIES, INC.

(Name of Corporation	n as currently filed with the Florida Dept. of State)
P16000035586	
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	poration:
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co", A professional corporation name must contain the bbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD R	RESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<i></i>
D. If amending the registered agent and/or registere new registered agent and/or the new registered of	d office address in Florida, enter the name of the fice address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	Plorida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regis	torad Agants
I hereby accept the appointment as registered agent. 1	am familiar with and accept the obligations of the position.
	TWo Devices of American
Signat	uro 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 Da	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
_X Add	SV	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) x Change	DS	_	Joseph Lisiecki, Jr.	
Add				
Remove				
2) X Change	DPT		Valerie Lisiecki	
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
5) Change Add		_		
Remove				
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
,	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	<u> </u>

The date of each amendment(s) add date this document was signed.	pption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this artment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes east for the amendme icient for approval.	ent(s)
☐ The amendment(s) was/were appromust he separately provided for e	oved by the shareholders through voting groups. <i>The following statuch voting group entitled to vote separately on the amendment(s):</i>	'ement
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by	.,,	
	(voting group)	
The amendment(s) was/were adop action was not required.	ed by the board of directors without shareholder action and shareholder	older
☐ The amendment(s) was/were adop action was not required.	ed by the incorporators without shareholder action and shareholder	;
May 26, 201 Dated	5	
Signature	Deris Jusiech	
(By a dire selected,	ctor, president or other officer — if directors or officers have not be by an incorporator — if in the hands of a receiver, trustee, or other of I fiduciary by that fiduciary)	
V	alerie Lisiecki	
_	(Typed or printed name of person signing)	
p	resident	
	(Title of person signing)	