P16000037736

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
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COVER LETTER

Division of Corporations				
NAME OF CORPORATION: <u>Agron King Inc.</u> DOCUMENT NUMBER: P16000037736				
DOCUMENT NUMBER: 16/6000037736				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Acron King Stame of Contact Person Acron King Tuc Firm/Company 16906 Crawley Rd Address Odessa FL 33556 City/State and Zip Code				
16906 Crawley Rel				
Odessa FL 33556 City/ State and Zip Code				
City/ State and Zip Code Apking 23 @ amail, com E-mail address: (to be used for future annual report notification)				
	,			
For further information concerning this matter, please call:				
Agrow 1Ch 5 at (813) 32 Name of Contact Person Area Code & Daytin	3-4577			
Name of Contact Person Area Code & Daytir	ne Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of S	tate:			
Certificate of Status Certified Copy Certific (Additional copy is Certified	Filing Fee cate of Status ad Copy onal Copy osed)			
Mailing Address Street Address				

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

TO: Amendment Section

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

. . . .

Articles of Amendment

to

Articles of Incorporation

Acron King Inc.
Haron King Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P160000 37236
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent
(Florida street address)
New Registered Office Address:, Florida
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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	PT John l	<u>Doe</u>	
X Remove	V Mike	Jones	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	<u></u>	Robert Merrit	6305 Woodsman Dr. Wesley Chaple, FC
X Add			Wesley Chaple, FC
Remove			33544
2) Change	<u></u>	James Merrit	6305 Woodsman Dr.
Add			Wesley Chaple FL
Remove			33544
3) Change			
Add		•	
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
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amending or adding additional Arti- ttach additional sheets, if necessary).	(Be specific)
<u>. </u>	

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an amendment provides for an exchorovisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:

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 amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	•
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 1//1/16	
Signature Auron Ving (By a director, president or other officer – if directors or officers have not been	
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Aaron King (Typed or printed hame of person signing) President	
(Typed or printed name of person signing)	
(Title of person signing)	
(Title of person signing)	