(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
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JUN 28 2016

C LEWIS

COVER LETTER

TO: Amendment Section

Division of Corporations huck Shaver. NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

Articles of Incorporation of

NIE 111N 23 PM 12: 53

Chu	ck Shav	er. P.A.	2016 JUN 23	FM 12. 00
(Name of Cor	poration as currently	filed with the Florid	a Dept. of State)	
P	160000	28263		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this F	lorida Profit Corpora	tion adopts the fo	llowing amendment(s)
A. If amending name, enter the new name of	the corporation:	. P.A.		The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	he word "corporation, "Corp," "Inc," or "C	,' "company," or "i o". A professional o	ncorporated" or corporation name	the abbreviation
B. Enter new principal office address, if app (Principal office address MUST BE A STREE				
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)	CE BOX)			
D. If amending the registered agent and/or r new registered agent and/or the new regis	<u>egistered office addre</u> stered office address:	ss in Florida, enter t	he name of the	
Name of New Registered Agent			,	
	(Florida stree	et address)		
New Registered Office Address:	·		, Florida	
	(0	City)		(Zip Code)
New Registered Agent's Signature, if changing	ng Registered Agent:			•
I hereby accept the appointment as registered a	agent. I am familiar wi	th and accept the obli	igations of the pos	ition.
	Signature of Nov. Bo	gistered Agent if cha	naina	

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	nes		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	Title		Name		<u>Addres</u> s
1)Change				-	
Add				-	
Remove					
2) Change		···		-	
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change					
Add					
Remove					
5) Change	-	_		-	
Add				•	
Remove					
6) Change		_ <u>.</u>		_	
, Add		-		_	
Remove				•	

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)	(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
provisions for implementing the amendment if not contained in the amendment itself:		
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(g not appricable, institute 1971)		endment if not contained in the amendment itself:
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	1.10	12011		
The date of each amendment(s) ac	loption:	14016	VOLTADY	는, if other than the FSTAIL
date this document was signed.	•	•	SECRETARY (DIVISION OF CO	EPORATION"
Effective date if applicable:			9111010	-140. E2
	(no more than	90 days after amendment file	dai 201 6 JUN 23	AM 15: 22
Note: If the date inserted in this be document's effective date on the De		licable statutory filing require	ments, this date will	I not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
☐ The amendment(s) was/were add by the shareholders was/were su		he number of votes cast for the	amendment(s)	
☐ The amendment(s) was/were app must be separately provided for				
"The number of votes cast	for the amendment(s) was/w	ere sufficient for approval		
by		.,,		
	(voting group)			
☐ The amendment(s) was/were add action was not required.	pted by the board of directo	rs without shareholder action a	and shareholder	
The amendment(s) was/were add action was not required.	pted by the incorporators wi	ithout shareholder action and s	hareholder	
Dated	,1912016	Slove		
Signature(By a d	irector, president or other of	ficer – if directors or officers h	nave not been	
		the hands of a receiver, trustee		
appoin	ted fiduciary by that fiduciar	у)		
	Cha	rles Shave	<u></u>	
	(Typed or printe	d name of person signing)		
		EO		
	(Titl	e of person signing)		