## P16000042456

(Re	equestor's Name)			
(Ad	ldress)			
(Ac	ldress)			
(Ci	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	ısiness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
		İ		





800292149728

12/09/16--01009--007 \*\*35.00

SLOKETARY OF STATE DIVISION OF CORPORATION

DEC 12 2016

C LEWIS

## **COVER LETTER**

Division of Corporations DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ence mcking inc 5 Edsel Ave Address E-mail address: (to be used for future annual report notification) 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 Certified Copy Certificate of Status

**Mailing Address** 

TO: Amendment Section

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

(Additional copy is

enclosed)

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

Certified Copy

(Additional Copy is enclosed)

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

FILEL SECRETARY OF STATE DIVISION OF CURPORATE :

	(116 DEC - 9 PM 1: 18
1 siyand Irycking inc	
(Name of Corporation as currently filed with the Florida Dept. of	State)
P 160000 42456	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts its Articles of Incorporation:	s the following amendment(s) t
A. If amending name, enter the new name of the corporation:	777
name must be distinguishable and contain the word "corporation," "company," or "incorporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation 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 new registered agent and/or the new registered office address:	f the
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address: , Flo.	at da
(City)	(Zip Code)
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 t	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 D	<u>Ooe</u>	
X Remove	<u>V</u> <u>Mike J</u>	lones	
X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP	Daniel Planell	3298 Indiana Ave
Add			57 youd FL 341769
Remove			
2) Change	VP	Edwin Rodriguez	25435 Mathewst
_X_ Add			Christmas FL 32709
Remove			
3) Change	<del></del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	/		
Add			
Remove			
6) Change	<del></del>		
Add			
Remove			

Page 2 of 4

inden duamonas succis, y necessary).	icles, enter change(s) here: (Be specific)
/	
·	
an amandment provides for an evol-	nange, reclassification, or cancellation of issued shares,
rovisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(i) noi applicable, indicale IVA)	
(ij noi applicable, malcale IVA)	The second secon
(i) not applicable, malcale IVA)	
(ij noi applicaole, malcale IVA)	
(у погаррисаоне, таксане 14/А)	
(ij noi appiicaoie, maicaie IVA)	
(ij noi appiicaoie, maicaie IVA)	
(у погаррисаоте, таксие гож)	
(ij noi appiicaoie, maicaie IVA)	
(y noi appiicaole, maicale IVA)	
(ij noi appiicaoie, maicaie IVA)	
(ly not appricable, malcule IVA)	
(ly not applicable, malcule IVA)	
(l) not applicable, malcale IVA)	

The date of each amendment(s) ad	option: 12/6/16		المراجعة المراجعة	if other than the
date this document was signed.			DIVISION OF COR	
Effective date <u>if applicable</u> :	(no more than 90 days a	fter amendment file date)	<del>2015 DEC -9</del>	<del>P#  :</del>  8
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable sta	tutory filing requirements,	this 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 suf	oted by the shareholders. The number	of votes cast for the amend	dment(s)	
	roved by the shareholders through vot each voting group entitled to vote sep			
"The number of votes cast f	for the amendment(s) was/were suffici	ent for approval		
by	(voting group)			
	(voting group)			
The amendment(s) was/were adopaction was not required.	oted by the board of directors without	shareholder action and sha	reholder	
☐ The amendment(s) was/were adopaction was not required.	oted by the incorporators without shar	eholder action and sharehol	lder	
Dated	12/6/16 David Rodria	L		
(By a di	rector, president or other officer -if d	lirectors or officers have no	t been	
	, by an incorporator – if in the hands	of a receiver, trustee, or oth	er court	
appointe	ed fiduciary by that fiduciary)			
-	1 David Ko	drique		
	(Typed or printed name of	person sighing)		
_	President			
	(Title of person	n signing)		