## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone

: (323)962-8600

Fax Number

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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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| K:771 B T I | ACCTORS: |  |  |  |

## COR AMND/RESTATE/CORRECT OR O/D RESIGN PRO GRADING, INC.

| Certificate of Status | 0       |
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Corporate Filing Menu

JUN 1 4 2016 Help

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## **COVER LETTER**

| TO: Amendment Section Division of Corporations   |  |   |
|--|--|---|
| NAME OF CORPORATION: PRO GRADING   | , INC.   |   |
| DOCUMENT NUMBER: P16000046970  | , , , , , , , , , , , , , , , , , , ,  |   |
| The enclosed Articles of Amendment and fee are st  | ubmitted for filing.   |   |
| Please return all correspondence concerning this ma  | atter to the following:  |   |
| Cheyenne Moseley   |  |   |
|  | Name of Contact Person   |   |
| LegatZoom.com, Inc.  |  |   |
|  | Firm/ Company  |   |
| 101 N. Brand Blvd., 11th   | Floor  |   |
|  | Address  |   |
| Glendale, CA 91203   |  |   |
|  | City/ State and Zip Code   |   |
| lualvarez936@live.com  |  |   |
| _  | used for future annual report notifica   | ation)  |
| ,  | ,  | •   |
| For further information concerning this matter, plea   | ise call:  |   |
| Cheyenne Moseley   | at ( 800 , 77  | 3-0888 ext. 9724  |
| Name of Contact Person   | Area Code & D  | 3-0888 ext. 9724<br>aytime Telephone Number   |
| Enclosed is a check for the following amount made  | payable to the Florida Department  | of State:   |
| □ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status                                  | Certified Copy Ce<br>(Additional copy is Ce<br>enclosed) (A                            | 2.50 Filing Fec<br>rtificate of Status<br>rtified Copy<br>dditional Copy<br>enclosed) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address Amendment S Division of Co Clifton Buildit 2661 Executiv Tallahassee, F | ection<br>orporations<br>ng<br>e Center Circle  |

|   | Articles of Amendment  |                 |                    |                 |
|---|--|-----------------|--------------------|-----------------|
| •   | ŧo   |                 |                    |                 |
|   | Articles of Incorporation of   |                 |                    | 0               |
|   |  |                 |                    | 7               |
|   | PRO GRADING, INC.  | 104.4.          |                    | JUN 10 FM L. BI |
| (Name of Corporation as cur   | reptiv filed with the Florida Dept. of   | Siale           |                    | =               |
|   | P16000046970   |                 |                    | -<br>-          |
| (Document N   | umber of Corporation (if known)  |                 |                    |                 |
| Pursuant to the provisions of section 607.100 as Articles of Incorporation:   | 6, Florida Stamtes, this Florida Profit  | Curporation add | opts the following | ng amendment    |
| . If amending name, enter the new name  | of the corporation:  |                 |                    |                 |
| name must he distinguishable and contain  |  |                 |                    | _The new        |
|   |  | <b>-</b>        |                    | commo me        |
| ord "chartered," "professional association<br>3. <u>Enter new principal office address, if a</u><br>Principal office address <u>MUST BE A STRI</u>  | or the abbreviation "P.A."  policable: EET ADDRESS )   |                 |                    | -<br>-          |
| word "chartered," "professional association  Enter new principal affice address, if a Principal affice address MUST BE A STRI  C. Enter new mailing address, if auplicab (Mailing address MAY BE A POST OF)   | policable: EET ADDRESS )  Ple: FICE BOX)  r registered office address in Florida.  |                 |                    | -               |
| Ford "chartered," "professional association  Enter new principal affice address, if as Principal affice address MUST BE A STRI  Enter new mailing address, if auplicab (Mailing address MAY BE A POST OF)  If amending the registered agent and/o new registered agent and/or the new re- | or the abbreviation "P.A."  policable: EET ADDRESS )  le: FICE BOX)  r registered office address in Florida. Existered office address: |                 |                    | -<br>-<br>-     |
| Ford "chartered," "professional association  Enter new principal affice address, if as Principal affice address MUST BE A STRI  Enter new mailing address, if auplicab (Mailing address MAY BE A POST OF)  If amending the registered agent and/o new registered agent and/or the new re- | policable: EET ADDRESS )  Ple: FICE BOX)  r registered office address in Florida.  |                 |                    | -               |
| D. If emending the registered agent and/o<br>new registered agent and/or the new re   | or the abbreviation "P.A."  policable: EET ADDRESS )  le: FICE BOX)  r registered office address in Florida. Existered office address: |                 |                    | -               |

Signature of New Registered Agent, if changing

To:

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 = Chalman 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 us an Add.

| Example:<br>X Change          | PI        | John Doe        |  |
|-------------------------------|-----------|-----------------|--|
| Х Веточе                      | Y         | Mike Jones      |  |
| _X Add                        | <u>sv</u> | Sally Smith     |  |
| Type of Action<br>(Check One) | Title     | Name            | <u>Address</u>                         |
| i) Change                     | SD        | VERLINA ALVAREZ | 771 18TH ST. NE                        |
| Add Remove                    |           |                 | NAPLES, FL 34120                       |
| 2) X Change                   | PTSD      | LUIS ALVAREZ    | 771 18TH ST. NE                        |
| Add                           |           |                 | NAPLES, FL 34120                       |
| Remove                        |           |                 |  |
| 3) Change                     |           |                 |  |
| Add                           |           |                 | ###################################### |
| Remove                        |           |                 |  |
| 4) Change                     |           |                 |  |
| Add                           |           |                 | - N                                    |
| Remove                        |           |                 | <del>-</del>                           |
| 5) Change                     |           |                 | · · · · · · · · · · · · · · · · · · ·  |
| Add                           |           |                 |  |
| Remove                        |           |                 |  |
| 6)Change                      |           |                 |  |
| Add                           |           |                 |  |
| Remove                        |           | •               |  |

|  |  |  | (Be speci                |                               |                                 |                                 |                                       |
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| The date of each umendm                       | ent(s) adoption: 6/2/2016   | _, if other than the |
|---|---|----------------------|
| date this document was sig-                   | ned.  |                      |
| Effective date if applicable                  | ie:   |                      |
|   | (no more than 90 days after amendment file date)  | <del></del>          |
| Adoption of Amendment(                        | (CHECK ONE)   |                      |
|   | were adopted by the sharebolders. The number of votes cast for the amendment(s) s/were sufficient for approval.   |                      |
| ☐ The amendment(s) was must be separately pro | were approved by the shareholders through voting groups. The following statement vided for each voting group entitled to vote separately on the amendment(s):   |                      |
|   | otes cast for the amendment(s) was/were sufficient for approval   |                      |
| by  | (voting group)  | •                    |
|   | (voling group)  |                      |
| The amendment(s) was acrion was not required. | were adopted by the board of directors without shareholder action and shareholder   |                      |
| The amendment(s) was action was not required. | /were adopted by the incorporators without shareholder action and shareholder   |                      |
| Dated_  | 6/3/16  |                      |
| Signatur                                      |   | _                    |
|   | (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) |                      |
|   | LUIS ALVAREZ  |                      |
|   | (Typed or printed name of person signing)   | <del></del>          |
|   | PRESIDENT   |                      |
|   | (Title of person signing)   | <del></del>          |