P16000047810

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
`	•	,
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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SECRETARY OF STATE

AUG 1 2016

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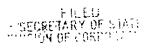
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	AATION: ana-hob, inc.		
DOCUMENT NUME	D14000047010		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Kimberly R. Hayes		
		Name of Contact Person	1
	ana-hob, inc.		
		Firm/ Company	
	701 South Howard Avenue, 5		
		Address	
	Tampa, FL 33606		
		City/ State and Zip Code	e
lsimbo	erly@anahob.com		
——————————————————————————————————————	×	sed for future annual report	notification)
	E-man audress. (to be us	sed for future armual report	nouncation)
For further information	n concerning this matter, pleas	se call:	
Kimberly R. Hayes		at (de & Daytime Telephone Number
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



2016 JUL 22 AM 8: 27

ana-hob, inc.	
(Name of Corporation as	currently filed with the Florida Dept. of State)
P16000047810	
(Document N	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	rutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	ration:
NIA	The new
	orporation," "company," or "incorporated" or the abbreviation nc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent WA	
	Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register 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.

X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	VTS	Kimberly R. Hayes	701 South Howard Avenue
Add			Ste 106-122
Remove			Tampa, Florida 33606
2) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
1) (2)	
NIH	
	
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·	
F. If an amendment provides for an exchange, reclassification, or cancellation provisions for implementing the amendment if not contained in the amendment.	of issued shares, ment itself:
(if not applicable, indicate N/A)	Ment texti
NA	
	

•	May 26, 2016	r li_l_	U
The date of each amendment(s) adop	tion:	SPIRI JARY	if other than the
date this document was signed.		A TOTAL SERVICE	LAT 12 41
Effective date <u>if applicable</u> :		2016 JUL 22	AM 8: 27
Effective date it applicable.	(no more than 90 days after amendment file date)	<u> </u>	
Note: If the date inserted in this bloc document's effective date on the Depa	ek does not meet the applicable statutory filing requirements truent of State's records.	, this date will not	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the americient for approval.	ndment(s)	
	ved by the shareholders through voting groups. The following ch voting group entitled to vote separately on the amendment		
"The number of votes cast for	the amendment(s) was/were sufficient for approval		
by	"		
<u> </u>	(voting group)		
action was not required.	ed by the board of directors without shareholder action and shareholder incorporators without shareholder action and shareholder		
Dated	ctor, president or other officers if directors or officers have not on the state of		
K	mberly R. Hayes		
_	(Typed or printed name of person signing)		
V	ce President, Treasury, Secretary		
	(Title of person signing)		