P16000051777

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T. LEMIEUX

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Spenser Hensel	Art	
DOCUMENT NUM	BER: P16000051777		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Spenser Hensel		
		Name of Contact Person	
	Spenser Hensel Art		
		Firm/ Company	
	15501 Bruce B. Downs Bl	• •	
		Address	
	Tampa, FL 33647		
		City/ State and Zip Code	
OU: 1		·	
Stick	s.of.fire.creative@gmail.co		
	E-mail address: (to be us	sed for future annual report t	notification)
For further information	n concerning this matter, pleas	se call:	
Spenser Hensel		813 at (774-2066 Oaytime Telephone Number
Name	of Contact Person	Area Coc	le & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52 50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassec, FL 32314	Amendi Division Clifton 2661 Er	Address ment Section n of Corporations Building secutive Center Circle ssec, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

Spenser Hensel Art		
(<u>Name of</u>	f Corporation as currently	filed with the Florida Dept of State)
P16000051777		1: 5b
	(Document Number of	Corporation (if known ALLAHASSEE, FLORIDA)
Pursuant to the provisions of section 607.1 ts Articles of Incorporation:	006, Florida Statutes, this F	Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new nar	me of the corporation:	
Sticks of Fire Creative Inc.		The new
	ntion "Corp," "Inc," or "C	" "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		1304 E Knollwood Street
		Tampa, FL 33604
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		1304 E Knollwood Street
		Tampa, FL 33604
). If amending the registered agent and new registered agent and/or the new		
Name of New Registered Agent	NA	
Name of New Registered Agent		
	(Florida stre	et address)
	NA	
New Registered Office Address:		, Florida
	,	
New Registered Agent's Signature, if ch hereby accept the appointment as registe		ith and accept the obligations of the position.
	Signature of Many D.	gistered Agent, if changing
	ognature oj ivew Ke	giorerea rigent, y 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	<u>PT</u>	John Doc	
X Remove	<u>V</u>	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) Change	Р	David Alonso	16217 Oakmanor Drive
X Add			Tampa, FL 33624
Remove			
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	·		
Add			
Remove			

(Attach additional sheets, if necessary).	ticles, enter change(s) here: . (Be specific)	
· · · · · · · · · · · · · · · · · · ·		
		-
. If an amendment provides for an excl	change, reclassification, or cancellation of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
	y split between both presidents Spenser Hensel and David Alonso(50/50
shares of this company will be evenly		
		_

The date of each amendme	nt(s) adoption:, if other than the
date this document was signed	ed.
Effective date if applicable	(no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
	n this block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
☐ The amendment(s) was/w must be separately provide	ere approved by the shareholders through voting groups. The following statement ded for each voting group entitled to vote separately on the amendment(s):
"The number of vot	es cast for the amendment(s) was/were sufficient for approval
by	
, 	(voting group)
☐ The amendment(s) was/w action was not required.	ere adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/w action was not required.	ere adopted by the incorporators without shareholder action and shareholder
	18,2017
Signature	
	(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)
	Spenser Hensel
	(Typed or printed name of person signing)
	President
	(Title of person signing)