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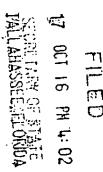
| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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OCT 1 8 2017 S. YOUNG



TO: Amendment Section

Division of Corporations NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person ervices City/State and Zip Code, E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person Area Code & Daytime 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 & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

| | Articles of Am | ienament | | | | |
|--|-----------------------------|----------------------------|--------------------|---|--------------|---------|
| | to Articles, of Inco | rporation, . | 1 | _ | | |
| Expana | 1 Lo" | 915hC | COY | D . | | |
| (Name of Corpo | ration as currently | filed with the Florida D | Dept. of State) | | | |
| P/ | 60000 | 578 73 | | | | |
| , (po | ocument Number of 0 | Corporation (if known) | | | | |
| Pursuant to the provisions of section 607.1006. Flits Articles of Incorporation: | orida Statutes, this $m{F}$ | lorida Profit Corporatio | n adopts the follo | owing ame | ndmen | n(s) t |
| A. If amending name, enter the new name of the | ne corporation: | | | | | |
| | | | | The | new | |
| name must he distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or | Corp," "Inc." or "C | o". A professional corp | | | | |
| B. Enter new principal office address, if applie | able: | | | | | |
| (Principal office address <u>MUST BE A STREET</u> | | | | | | |
| | | | | | | |
| | | | ڹ | 3 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) | | |
| C. Enter new mailing address, if applicable: | | | | | 0 | |
| (Mailing address MAY BE A POST OFFICE | E BOX) | | | | | <u></u> |
| | | | | | 9 | |
| | | | | - INC. | 2 | |
| | | | | 95 | Ŧ. | |
| If amending the registered agent and/or reg new registered agent and/or the new registered. | | ss in Florida, enter the | name of the | 5 | 02 | |
| | | | : | - | | |
| Name of New Registered Agent | | | | | | |
| | (Florida stree | at a delicana | | | | |
| | ir torida siree | auaress) | | | | |
| New Registered Office Address: | | City) | Florida | (Zip Code) | | |
| | | | l | mp coucy | | |
| | | | | | | |
| New Registered Agent's Signature, if changing | | | | | | |
| I hereby accept the appointment as registered age | nt. I am familiar wi | ith and accept the obligat | ions of the positi | on. | | |
| | | | | | | |
| | | | | | | |
| | Signature of New Reg | gistered Agent, if changii | ng | | | |

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 Doe | |
|----------------------------|--------------|---------------------|---------------|
| X Remove | <u>v</u> | Mike Jones | |
| | | | |
| <u>X</u> Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name Address | |
| 1) Change | VP | Maria Muales 5931 5 | ow HOPE |
| Add | | miami, | FC 33193 |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | - |
| Remove | | | |

| E. <u>If amending or</u> (Attach <i>additiona</i> | adding additional Ar al sheets, if necessary). | ticles, enter chan (Be specific) | ge(s) here: | | | |
|--|---|-------------------------------------|---------------------------------------|-------------------------|-------------|---|
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| F. <u>If an amendme</u> | nt provides for an exc | hange, reclassific | ation, or cancella | tion of issued sha | res, | |
| <u>provisions for</u> | implementing the am | endment if not co | ontained in the an | <u>iendment itself:</u> | | |
| (if not appi | licable, indicate N/A) | | | | | |
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| The date of each amendment(s) adoption: |
|---|
| Effective date if applicable: (no more than 90 days after amendment file date) |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t document's effective date on the Department of State's records. |
| Adoption of Amendment(s) (CHECK ONE) |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): |
| "The number of votes cast for the amendment(s) was/were sufficient for approval |
| by" |
| by |
| The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. |
| DatedSignature |
| (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) |
| Franki Hernandez |
| (Typed or printed name of person signing) |
| President |
| (Title of person signing) |