## P16000055302

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August 1, 2016

LINDSEY Q. MAULDIN, JR 811 18TH ST ORLANDO, FL 32805

SUBJECT: PHUNK BROTHA FAMILY ENTERTAINMENT CORP.

Ref. Number: P16000055302

We have received your document for PHUNK BROTHA FAMILY ENTERTAINMENT CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the Registered Agent is changing, part 6 of the form must be fill out.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carol Mustain Regulatory Specialist II

Letter Number: 516A00016093



## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 13, 2016

LINDSEY Q. MAULDIN, JR 811 18TH ST ORLANDO, FL 32805

SUBJECT: PHUNK BROTHA FAMILY ENTERTAINMENT CORP.

Ref. Number: P16000055302

Memo #: 022249-B

This letter is to inform you that your check number 100 for \$35.00, which was dated July 19, 2016 and submitted for PHUNK BROTHA FAMILY ENTERTAINMENT CORP. has been returned to us by your bank because of NON SUFFICIENT FUNDS.

We are notifying you because our records indicate that the paperwork for PHUNK BROTHA FAMILY ENTERTAINMENT CORP, has not been filed and was returned to you because of deficiencies in the document. If you send the document back to us to be filed, be sure to enclose a cashier's check or money order in the amount of \$50.00, as we cannot take credit card information over the phone. This will cover the unpaid check and also the service fee required by law under section 215.34, Florida Statutes.

When sending the cashier's check or money order, please indicate that it is a replacement for the returned check mentioned above. Also, please include in your response the Debit Memo number given above. Send your response to:

Division of Corporation Attn: CAROL MUSTAIN P.O. Box 6327 Tallahassee, FL 32314

If you have any questions you may contact me at (850) 245-6887.

Garry Leonard Administrative Assistant

Letter Number: 516A00022088

## **COVER LETTER**

TO: Amendment Section

Division of Corporations					
NAME OF CORPORATION: PHUNK BROTHS FAMILY ENTERTAINMENT Corp.					
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Lindsey Q. Mauldin JR Name of Contact Person					
Physic Could Family Foundation of					
PHUNK BROTHA FAMILY ENTERTAINMENT					
911 19th STEET  Address  DRIANDO, FLA. 32805  City/ State and Zip Code					
Address					
DRIANDO, FLA. 32103					
City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
E-mail address. (to be used for future annual report normeation)					
For further information concerning this matter, please call:					
Linosey Q. Mavldin Jn at (407) 860 - 1664  Name of Contact Person Area Code & Daytime Telephone Number					
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 Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  Certified Copy (Additional Copy is enclosed)					
Mailing Address Amendment Section  Street Address Amendment Section					

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

## Articles of Amendment

to

Articles of Incorporation

P16000055303 (Document Number	of Corporation (if known	)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corpora	tion adopts the following amendment	nt(s) to
A. If amending name, enter the new name of the corporation:	NA	Ti.	
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional c		!
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	NA	4	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	— NA	2018 BEC 12 PM 5:	n = FD
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office addre		he name of the	
Name of New Registered Agent	NA		
(Florida s	street address)		
New Registered Office Address:	(City)	, Florida(Zip Code)	
New Registered Agent's Signature, if changing Registered Ager I hereby accept the appointment as registered agent. I am familian	nt: r with and accept the oblig  Registered Agent, if chan		

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	PT John	Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	<u> / Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>Y</u>	Romello Campbell	811 18th Street
Add Remove			
2) Change	5_	AJ BURNS	911 18th STREET
Add Remove 3) Change	<u>C</u>	RASHAD SAMUELS	811 18th Street
Add Remove  4) Change Add	1	DURON BARKER	911 19th Street
X Remove  5) Change Add	D	D'Angelo GARCIA	911 18th Street
Remove  6) Change Add X Remove	<u>vP</u>	WESTEY JACKSON	911 18th STREET

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PHVVK	Broth	4 Family	. Entertai	nmen+	Conp.		
EASE	A 99	ANGEL	GARCIA	A5	President	of	
HWK	Brutha	Family	ENTERTA	umen+	President Comp.		
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	applicable, indi		mene ii not cont	amed in the	e amendment riser	<u></u>	
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The date of each amendment(s) adoption:	, if other than th
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 document's effective date on the Department of State's records.	will not be listed as th
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 Lingsey Q. Mauldin Ja. "  (voting group)	
(voting group)	
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.	
Dated 11/30/2016	
Signature Jaluban	
(By a director, president or 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)	
Wesley Jackson	
(Typed or printed name of person signing)	<del></del>
VP	
(Title of person signing)	<u> </u>