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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: 4THEBUYERS.CO	DM INC.	
DOCUMENT NUME	BER: P16000064762		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this mat	tter to the following:	
	ED WILLIAMS		
		Name of Contact Person	
	4THEBUYERS.COM INC		
•		Firm/ Company	
	2469 NW 64 STREET		
		Address	
	BOCA RATON, FL 33496		
		City/ State and Zip Code	
WILD	DDANCAN@AOL.COM		
	E-mail address: (to be us	sed for future annual report n	otification)
For further information	n concerning this matter, pleas	se call:	
ED WILLIAMS		at (201-6431
Name o	of Contact Person		e & Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	payable to the Florida Depar	tment 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)
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Divisior Clifton I 2661 Ex	nent Section n of Corporations

Articles of Amendment to Articles of Incorporation of

4THEBUYERS.COM, INC.				
(Name o	of Corporation as current	ly filed with the Florida Dept. o	f State)	
P16000064762				
	(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adop	its the following amendment(s) to	
A. If amending name, enter the new na	nme of the corporation:		5 T	
name must be distinguishable and con "Corp.," "Inc" or Co.," or the design word "chartered," "professional associa	eation "Corp," "Inc," or	"Co". A professional corporatio	ted" or the abbreviation on name must contain the	
B. Enter new principal office address,	if applicable:	2469 NW 64 STREET	7.5	
(Principal office address MUST BE A S		BOCA RATON, FL 33496		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2469 NW 64 STREET		
		BOCA RATON, FL 33496		
D. If amending the registered agent an new registered agent and/or the new			of the	
Name of New Registered Agent EDWARD WILLIAMS				
	2469 NW 64 STREET			
	(Florida st	reet address)		
New Registered Office Address:	BOCA RATON	F	33496 lorida	
		(City)	(Zıp Code)	
New Registered Agent's Signature, if c	hanging Registered Agen	1:		
I hereby accept the appointment as regist	tered agent. I am familiar	with and accept the obligations o	f 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	ARLENE WILLIAMS	5880 SUGAR PALM DR APT D
Add X Remove			DELRAY BEACH, FL 33484 US
2) Change	P	EDWARD WILLIAMS	2469 NW 64 STREET
X Add			BOCA RATON, FL 33496
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
6) Change			
Add			
Remove			

amending or adding additional Arti ttach additional sheets, if necessary).	(Be specific)			
				
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			===-	
			<u> </u>	
				
			<u> </u>	
		 -		
f an amendment provides for an excl	nange, reclassificatio	n, or cancellation	of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contain	ined in the amendr	nent itself:	
(i) not applicable, transact 1771)				
				
	-			

, .	AUGUST 3, 2016		
The date of each amendment(s) adopt			, if other than t
date this document was signed.	(DED 10 2014		
Effective date <u>if applicable</u> :	1BER 10, 2016		
	(no more than	90 days after amendment	file date)
Note: If the date inserted in this block document's effective date on the Depart		icable statutory filing req	uirements, this date will not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were adopted by the shareholders was/were sufficient		he number of votes cast fo	r the amendment(s)
The amendment(s) was/were approvemust be separately provided for each			
"The number of votes cast for	the amendment(s) was/w	ere sufficient for approval	
by	(voting group)		55 2
	(voting group)		
The amendment(s) was/were adopted action was not required.	d by the board of directo	rs without shareholder act	ion and shareholder
☐ The amendment(s) was/were adopte	d by the incorporators w	ithout shareholder action a	and shareholder
action was not required.		1	
	11/1/11/11	-116	
Dated	/ (1)(5	1/6	
	΄ θ Ι Λ	-	
Signature	MIN.		
		ficer – if directors or office the hands of a receiver, tru	
	fiduciary by that fiducian		istee, or other court
<u>^ -</u>	, ,	,	
EL	WARD WILLIAMS		
<u></u>	(Typed or printe	d name of person signing)	
PR	ESIDENT		
	(Tit	e of person signing)	