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And

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R. WHITE



## **COVER LETTER**

**TO:** Amendment Section

Division of Corporations
NAME OF CORPORATION: GALACTUS COSP (SCOSP)  DOCUMENT NUMBER: P1660067090
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dudney, JAJON A  Name of Contact Person  GALACTUS CORP  Firm/ Company  9 26th St S Apt #2  Address  St Petersburg FL 33712  City/ State and Zip Code  JASON Dudney & GMAil. Com  E-mail address: (to be used for future admual report notification)
For further information concerning this matter, please call:
Lutz, Ryan E at (727) 300-1925  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 Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to

Articles of Incorporation



	of		16 SEP 12 PM 2: 1/1	
	GALACTUS		SECRETARY & COM	
( <u>Name of C</u>	Corporation as currently	filed with the Flo	orida Dept. of State)	
	P1600006	7090		
	(Document Number of	Corporation (if kn	own)	
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06, Florida Statutes, this <b>F</b>	lorida Profit Corp	poration adopts the following amendm	ient(s) to
A. If amending name, enter the new name	of the corporation:			
			The ne	
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	on "Corp," "Inc," or "(	Co". A profession		
B. Enter new principal office address, if a (Principal office address MUST BE A STRI				
			· · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF)				
	<del></del>			
				•
D. If amending the registered agent and/o			er the name of the	
new registered agent and/or the new re	egistered office address:	<u>:</u>		
Name of New Registered Agent				
	(Florida stre	et address)		
New Registered Office Address:			, Florida	
	(	(City)	(Zip Code)	
Now Designated Agent's Signature if show	naina Dagistavad Agantı			
New Registered Agent's Signature, if char I hereby accept the appointment as registere			obligations of the position.	
	Signature of New R.	egistered Agent if	changing	
	Signature of New Re	egistered 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	PT	John Do	<u>be</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP	_	David L. Rice	175 East Grant St. Orlando, FC
X Add				Orlando, FZ
Remove				32806
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change	<del></del>	<del>_</del>		
Add				
Remove				
5) Change		<del></del>	<del></del>	
Add				
Remove				
6) Change			<del></del>	
Add				
Damova				

<u><b>If</b> a</u> (At	mending or adding additional Articles, enter change(s) here: ach additional sheets, if necessary). (Be specific)
	RUAN E Lotz and JASON A Dudney are in
	Ryan E Lutz and Jason A Dudney are in agreement to add David L. Rice
	an amendment provides for an exchange, reclassification, or cancellation of issued shares, rovisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)

The date of each amendment(s) adoption:, if other than t date this document was signed.
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 a 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"
(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 9/7/16 Signature Ryw Luk A Luk
(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)
DAVID L RICE
(Typed or printed name of person signing)
VP
(Title of person signing)