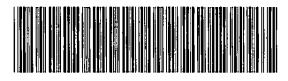


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(Add	dress)	
(City	//State/Zip/Phone	e #)
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SECRETARY OF STATE
TAKE AHASSEE FE ONLY.

And LIOV 03 2017

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, Fl. 32314

NAME OF CORPORA	TION: Shut	terupicon No	-pbs, IN.	<u></u>	
DOCUMENT NUMBE	тюн: <u>Sha</u> н r: <u>P11</u> 00	0074216			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.			
Please return all correspo	ondence concerning this ma	tter to the following:			
	,	Accu Silh	ecasa 1		
-		Arry Silb Name of Contact Person	on	· <u></u>	
		Firm/ Company	<u> </u>		
		Shu Herup. co Firm/Company 140 Gold Address	in Gate	PKWY	573.109
_					
_	17	City/State and Zip Con shutterup & g m	4105		
	lacc.	City/ State and Zip Coo	de		
	Lacour	shotter or is	comail- e	·	
	E-mail address: (to be us	SkaHer op &	(notification)	UNIT	
For further information co	oncerning this matter, pleas	se call:			
LACC	y Silberman	at (239	1 245-	- 3229	
Name of 0	Contact Person	Area C	ode & Daytime Tel	lephone Number	
Enclosed is a check for th	ne following amount made	payable to the Florida Dep	partment of State:		
道 \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Certificate of Certified Cop (Additional C is enclosed)	Status	
Amend Divisio	g Address ment Section in of Corporations ox 6327	Amen Divisi	t Address dment Section on of Corporations n Building		

2661 Executive Center Circle Tallahassee, FL 32301

FILED

Articles of Amendment

17 OCT 30 AM 9: 10

Articles of Incorporation - SECRETAIVE OF STATE OF TAREVAHASSEE FEORIUA Shuffer UP INC (Name of Corporation as currently filed with the Florida Dept. of State)	
Shuffer UP INC (Name of Corporation as currently filed with the Florida Dept. of State)	
(Name of Corporation as currently filed with the Florida Dept, of State)	
· · · · · · · · · · · · · · · · · · ·	
P 160000 742/6 (Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following american Articles of Incorporation:	ndment(s)
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A."	
3. Enter new principal office address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
 If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: 	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:	
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of 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	PT Jol	<u>hn Doe</u>	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	TRIS	TYLER LEACH	1460 Golden Gate PKW1
Add			Naples, FL 3405
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
····	
-	
If an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, nament if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:date this document was signed.	, if other than the
_	mendment file date)
(no more than 90 days after a	mendment file date)
Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	filing requirements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of volby the shareholders was/were sufficient for approval.	otes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting gr must be separately provided for each voting group entitled to vote separately	oups. The following statement by on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for	• •
by(voting group)	<u></u> ."
☐ The amendment(s) was/were adopted by the board of directors without share action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without sharehold action was not required.	er action and shareholder
Signature 7000 St. Common Signature 1000 St.	
Signature Facey School Strain	
(By a director, president or other officer – if director selected, by an incorporator – if in the hands of a reappointed fiduciary by that fiduciary)	ors or officers have not been eceiver, trustee, or other court
(Typed or printed name of perso	BERMAN
(Typed or printed name of perso	n signing)
Vi ²	
(Title of person sign	ing)

. . . .