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SECRETARY OF STATE

C. GOLDEN MAY 2 4 2018

COVER LETTER

TO: Amendment Section - Division of Corporations

/ 5-115	THE PIDE THE
NAME OF CORPORATION: 2 3 1 3	INSPIRE, INC. 90347
DOCUMENT NUMBER: 1 16 0000	10011
The enclosed Articles of Amendment and fee are sub	mitted for filing.
Please return all correspondence concerning this matt	er to the following:
LOR! M	Name of Contact Person
LET'S	TNSPIRE, INC. Firm/ Company
12200	SAN JOSE BLUD. Suite 21 Address
JACK SON	Ville FLORIDA 32,23 City/ State and Zip Code
	OMCAST, NET d for future annual report notification)
For further information concerning this matter, please	call:
LOR: MCDONALD Name of Contact Person	at (904) 591 - 7004 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made pa	ayable to the Florida Department of State:
\$35 Filing Fee \$\times \text{Certificate of Status}\$	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

L + T'S INSPIRE, INC	2018 MAY 23 PM [2: 1]
(Name of Corporation as currently filed with the F P 160000 90 3 47 (Document Number of Corporation (SECRETARY OF STATE
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation	INC, The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	'Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	12200 SAN JOSEBlud. Suite 21
	JACKSONVIlle H. 32223
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	12200 SAN JOSE BLUD.
	Suite 21
	TACKSONY, lie, Fl. 32223
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent LOR, MCI	DONALD
12200 SANS (Florida su	IDS = BIUL Suite 21 rect address)
New Registered Office Address: JACKSON V (City)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered ozent. I am familiar Signature of New Registered	with and accept the obligations of the position.

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>	<u>Name</u>		<u>Addres</u> s
1) Change Add Remove				
2) Change Add Remove			. <u>.</u>	
3) Change Add Remove				
4) Change Add Remove			<u>-</u>	
5) Change Add Remove				
6) Change Add Remove				

attach additio	or adding additiona onal sheets, if necess	ary). (Be spec	ific)			
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provisions fo	nent provides for an or implementing the opticable, indicate N	e amendment if	assification, or one on the contained in	cancellation of i	ssued shares, t itself:	
	· · · · · · · · · · · · · · · · · · ·					
						
		1				

The date of each amendment(s) ad	toption: 05/01/20/8
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
Adoption of Amendment(s)	(Check One)
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement 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)
	(voting group)
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
√ Dated 5 [1	6/18 2014 2014
Signature	Jos of My Some a
(By a d	irector, president or other officer – if directors or officers have not been
	d, by an incorporator – if in the hands of a receiver, trustee, or other court
appoint	ed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President_
	(Title of person signing)