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Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
Name of	f Contact Person	Area Co	de & Daytime Telephone Number	
H.C.H	il/cher	at(32/	, 431-6726	
For further information	concerning this matter, pleas	·	Harold C Hillcher 7430 Sunshine Skyway Ln S Apt 6 St Petersburg, FL 33711-4983	£0x
<u>H</u>	Hillcher	GOUT OOK sed for future annual report	e.Com/	
( 		City/ State and Zip Code	e	
-	7430 SK	Firm/ Company  WAY  Address	South # 603 FL 33711	
_	HAISOIG C	Name of Contact Persor		
·	HAROLD C	•	llcher	
	condence concerning this ma	•		
The enclosed Articles o	of Amendment and fee are su	bmitted for filing.		
DOCUMENT NUMB		091768		
NAME OF CORPOR	ATION: C+HE	nterprises,	INC. OF MARAthON	
TO: Amendment Section Division of Corporation				

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

BONT ON # 157

## Articles of Amendment

to

Articles of	Incorporation
	of

C+H Enterprises, Inc.		Ruthon		
(Name of Corporation as currently		a Dept. of State)		
P160000°	91768			
(Document Number of C	Corporation (if known	1)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fi</i> its Articles of Incorporation:	lorida Profit Corpora	ation adopts the foll	owing ame	ndment(s) to
A. If amending name, enter the new name of the corporation:	N/A		The	new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword" (Corp," "Inc," or "Coword") word "chartered," "professional association," or the abbreviation "P	o". A professional c	incorporated" or t corporation name i	he abbrevi	ation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		-1 <del>731-74-</del>		<u></u>
			- <del> </del>	-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	X/A		0V -9 F	T T
			- <del>- 2</del>	<del>-</del> -
D. If amending the registered agent and/or registered office addres	ss in Florida, enter t	he name of the	33	
new registered agent and/or the new registered office address:				
Name of New Registered Agent	N/A			
(Florida stree	t address)			
New Registered Office Address:		, Florida		
	City)		(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with the appointment as registered agent.	th and accept the obli	igations of the posit	ion	
accept the appointment at regimered agent. I unijunitat the	una accept the Oott	Sanois of the posit	1011.	
N/	/ 1A			
Signature of New Res	<b>FI</b> vistered Agent, if char	natina	<del></del>	

## 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	<u> Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sally	<u> / Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
I) Change	DIR	Henthor C. Hillcher	7430 Skyway Las.
Add Remove			#603 St. Reteasburg Florida 33711
2) Change	TD		7430 Skyway LA. S. #603 St. Petersburg
Add Remove 3) Change	<u>VD</u>	H.C. Hillchen	Florida 33711 PO. Box 500007
Add X Remove		11/4	Maruthon Florida 33050
Add Remove			
5) Change Add		N/A	
Remove		N/a	
6) Change			
Remove			

Anaon adamonai sneets,	if necessary). (Be sp	ter change(s) her pecific)	<u>.</u> .		
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f an amendment provider provider provisions for implementations.	nting the amendment	eclassification, or if not contained	cancellation of iss in the amendment	sued shares, itself:	
(if not applicable, ir	dicate N/A)				
		[/A			
	• /	. 1 .			
				<del></del>	
	<del></del>				

The date of each amendment(s) adoption date this document was signed.	i: November 7th, 2018, if other than the
Effective date <u>if applicable</u> :	N/A
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block document's effective date on the Departme	oes not meet the applicable statutory filing requirements, this date will not be listed as the nt of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by by the shareholders was/were sufficient	y the shareholders. The number of votes cast for the amendment(s) for approval.
	by the shareholders through voting groups. The following statement oting 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 adopted by action was not required.	y the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by action was not required.	y the incorporators without shareholder action and shareholder
Dated Noven	ber 7th 2018
(By a director,	president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court
	iciary by that fiduciary)
HAR	Old CARL Hillchen (Typed or printed name of person signing)
	VD
	(Title of person signing)