P16000091932

(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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COVER LETTER

Division of Corporations
NAME OF CORPORATION: Principal-IT, Incorporated DOCUMENT NUMBER: P1600091932
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Maria L. Meighan Name of Contact Person Principal - IT, Incorporated Firm/ Company 2075 SW 122 Ave # 214 Address Miami FL 33175 City/ State and Zip Code E-mail address: (to be used for future armual report notification)
For further information concerning this matter, please call:
Maria L. Meighan at (786) 314-2737 32 32 Area Code & Daytime Telephone Number 32
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

Principal - LT, Incorportated (Name of Corporation as currently filed with the Florida Dept. of Si	ate)	 	
P16000091932	ate)		
(Document Number of Corporation (if known)	····		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts to the Articles of Incorporation:	he following	amendi	ment(s) to
A. If amending name, enter the new name of the corporation:			
Principal-IT, Incorporated		The n	ew
name must be distinguishable and contain the word "corporation," "company," or "incorporated "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation n word "chartered," "professional association," or the abbreviation "P.A."			
B. 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)	2 6		-
	AHASSE	DEC 27	a grandy to
D. 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:	he in	PH 2: 3	Er atom 4483
Name of New Registered Agent			
(Florida street address)			
New Registered Office Address:, Flori			-
(City)	(Zip Ca	ode)	
New Registered Agent's Signature, if changing Registered Agent: I 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	<u>PT</u> <u>John</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	<u>P</u>	Hugh E. Meighan Je.	2075 SW 122 Ave
Add		5	#216
Remove			Міані, Fl 33175
2) X Change		Maria L. Meighan	2075 SW 122 AVE
Add		•	#216
Remove			MIOMI, F1 33175
3) Change		4	
Add			
Remove		,	
4) Change			
Add			
Remove			MA GENERAL TO THE STATE OF THE
5) Change			
Add			
Remove			
6) Change			
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 (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
	The state of the s

The date of each amendment(s) acd date this document was signed.	option:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendm	ent file date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing partment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cas fficient for approval.	t for the amendment(s)
	roved by the shareholders through voting groups. each voting group entitled to vote separately on th	
"The number of votes cast	for the amendment(s) was/were sufficient for appre	val
by		"
	(voting group)	
The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder	action and shareholder
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder actic	on and shareholder
Dated	2/22/16	•
Signature	Mario Meialian	
(By a d	rector, president or other officer - if hirectors or o	fficers have not been
	 by an incorporator – if in the hands of a receiver, ed fiduciary by that fiduciary) 	trustee, or other court
••	16	
	Maria L. Meight	2/1
	(Typed or printed name of person signif	ng)
	Vice Presider	n+
	(Title of person signing)	