## P16000094164

(Re	equestor's Name)	<del></del>
(Ad	ldress)	<u> </u>
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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FEB 21 2019
S. YOUNG

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Topher Consulting	Inc		
DOCUMENT NUMI	BER:			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	Christopher Schoder			
		Name of Contact Person	1)	
	Topher Consulting Inc			
		Firm/ Company		
	2716 Edgewater Ct	,		
		Address		
	Weston/FL 33332			
	<del></del>	City/ State and Zip Cod	c	
christ	opherschoder@gmail.com			
		sed for future annual report	notification)	
	.,			
For further information	n concerning this matter, pleas	se call:		
Christopher Schoder		954	8730266	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status	
Mailing Address			Address	
Amendment Section Division of Corporations		Amendment Section Division of Corporations		
	. Box 6327		Building	
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Topher Consulting Inc						
(Name )	of Corporation as current	ly filed with the Florida Dept.	of State)	_		
P16000094164						
	(Document Number of	of Corporation (if known)				
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation ado	pts the fol	llowing	amend	ment(s)
A. If amending name, enter the new na	ame of the corporation:					
Topher Sales Inc					The n	юw <sup>,</sup>
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	iation "Corp." "Inc." or	"Co". A projessional corporat	ated" or ion name	the abl	breviat	ion
B. Enter new principal office address,	if applicable:	N/A				
(Principal office address MUST BE A S						_
C. Enter new mailing address, if appl (Mailing address MAY BE A POST)  D. If amending the registered agent at new registered agent and/or the ne  Name of New Registered Agent	<u>OFFICE BOX</u> ) <u>nd/or registered office add</u>		e of the	TILLMINGSE FLUINDA	19 FEB 15 PH 5: 49	
	tFlorida si	rect address)				
New Registered Office Address:	N/A		_, Florida			
		(City)		(Zip Ce	)de)	
New Registered Agent's Signature, if c I hereby accept the appointment as regis			of the pos	ition.		
· · · · · · · · · · · · · · · · · · ·	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, a 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 = ChExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each offiheld. 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doc	
		Mike Jones	
X Remove	V		
<u>X</u> Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) N/A Change	N/A	N/A	N/A
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add	-		
Remove			
Z. 29			
6) Change			
Add			
Remove			

E. It amending of (Attach <i>addition</i>	r_adding_additional_A) nal_sheets, if necessary)	rticles, enter chang . (Be specific)	e(s) here:		
N/A					
<u> </u>					
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	ent provides for an ex				
	r implementing the an plicable, indicate N/A)		itaine <u>d in the ainer</u>	iament itseii:	
N/A					
<u> </u>					
- <del> </del>				<u>-</u>	
				-	
					<del>-</del> ·····

	12/31/2018	
The date of each amendment(s) ado	ption:	, if other than
date this document was signed.		
12/31/ Effective date <u>if applicable</u> :	2018	
encerve date in appareame.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Department	ock does not meet the applicable statutory filing requirements, this date ariment of State's records.	e will not be listed as
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	•
	oved by the shareholders through voting groups. The following statemen ach voting group entitled to vote separately on the amendment(s):	11
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
hy	··	
	(voting group)	
☐ The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adoptaction was not required.	ted by the incorporators without shareholder action and shareholder	
02/02/2019 Dated		
Dattu		
	et has	
Signature	ector, president or other officer – if directors or officers have not been	
	by an incorporator – if in the hands of a receiver, trustee, or other court	
	d fiduciary by that fiduciary)	
C	Thristopher Schoder	
_	(Typed or printed name of person signing)	
C	EO	
-	(Title of person signing)	