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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Twelve Tu ER: P1700	x/ve/bldsig6	rpany	
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	pondence concerning this ma	· ·		
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E-mail address: (to be used for future annual report notification)				
For further information	concerning this matter, pleas	se call:		
Mark 1	te10T	at (727	, 4597329	
	f Contact Person		de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee	Certificate of Status	Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)	
<u>Mail</u>	ing Address	Street	Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

FILEU SECRETARY OF SEAL BIVISION OF CORECEAUSE

## Articles of Amendment to Articles of Incorporation of

2017 JAN 23 PM 1: 35

VI	·
TWELVETUSIVE 14	SLPING BOFON Y
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P17000002	
(Document Number o	of Corporation (if known)
·	,
ursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s
. If amending name, enter the new name of the corporation:	
They Tining Idas	BIOL CAMPOLIY
ame 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
. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS )	NK
most be A STREET ADDRESS	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
(Maining maintess MAT BE AT OUT OF THE BOX)	
If amonding the maistaned agent and/or registered office addle	ness in Elouida, autou the name of the
<ul> <li>If amending the registered agent and/or registered office address new registered agent and/or the new registered office address</li> </ul>	
Name of New Registered Agent	_
Name of New Registered Agent NIX	
(Florida str	reet address)
New Registered Office Address: N	, Florida
•	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registered Agent	
hereby accept the appointment as registered agent. I am familiar v	van una accept the obligations of the position.
ΝΑ	
Signature of New R	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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	Jennier Cascardo	PO BOX
Add			10343
Remove			Anna Maria F1342
2) Change	<del></del>		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
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N/A						
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•	SECRETARY OF STATE
The date of each amendment(s) adóption:	<u>a vision of Cosif other than the another than the anoth</u>
date this document was signed.	2017 JAN 23 PH 1: 38
Effective date if applicable:	
(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this block does not meet the applicable statutory filing requirem document's effective date on the Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the aby the shareholders was/were sufficient for approval.	amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendment.	wing statement nent(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 the board of directors without shareholder action an action was not required.	d shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	areholder
Dated	
Signature 2	
(By a director, president or other officer – if directors or officers ha	
selected, by an incorporator – if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary)	or other court
(Typed-or printed name of person signing)	
(Typed-or printed name of person signing)	
(Title of person signing)	
(Title of person signing)	