

(Requestor's Name)
(Address)
(tuanoss)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800300264808

06/23/17--01016--002 **35.00

JUN 29 2017 R. WHITE

COVER LETTER

TO: Amendment Section

Division of Corporations Excedis NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: 4010 W. State Street E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Brian Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$**43.75 Filing Fee & **□\$**43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to Articles of Incorporation

17 JUN 23 PM 12: 20

4.	of	17 JUH 23 PM I2: 20	,
Exced	15, Inc.	1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	
(Name of Corporation	as currently filed with th	ne Florida Dept. of State)	, -
P1700000	<u> 5302 </u>		
(Documen	t Number of Corporation ((if known)	
rsuant to the provisions of section 607.1006, Florida St Articles of Incorporation:	tatutes, this <i>Florida Profit</i>	t Corporation adopts the following ame	ndment(
If amending name, enter the new name of the corp	oration:		
me must be distinguishable and contain the word		The	new
Corp.," "Inc.," or Co.," or the designation "Corp," or the about the contraction," or the about the contraction of the contract	"Inc," or "Co". A profe	essional corporation name must contai	in the
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADDRE</u>	<u>ESSS</u>)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	42		
	office address in Florida	a, enter the name of the	
If amending the registered agent and/or registered		<u> </u>	
If amending the registered agent and/or registered new registered agent and/or the new registered off	<u>ice address:</u>		
new registered agent and/or the new registered off	ice address:		
	ice address:		
new registered agent and/or the new registered off	ice address: (Florida street address)		
new registered agent and/or the new registered off		, Florida	

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 Do	<u>>e</u>	
X Remove	<u>y</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sr	n <u>ith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	CEO	_	Nicholas M. Kaubuklis, OMD	4010 W. State Street
Add				Tampa, FL 33609
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		-		
Add				
Remove				
5) Change		-		
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
<u> </u>	
the second secon	
If an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(
	

The date of each amenidment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	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 amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Dated 6/19/17 Signature Signature	
(By a director, president or other officer - if directors or officers have not been	_
selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Brian Hauser	
(Typed or printed name of person signing)	
president	
(Title of person signing)	