## P17000007298

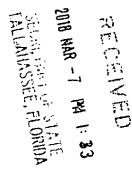
(Re	questor's Name)	
bA)	dress)	
(Ád	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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SECRETARY OF STATE
ALLIAHASSEF OF STATE

HAR 0 7 2010



## COVER LETTER

TO: Amendment Section Division of Corpor			1
Division of Corpor	ations		
NAME OF CORPOR	ATION: ///a	rk Cach	ran Enterprises
DOCUMENT NUMBI	er: <u>P17000</u>	0007298	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this mat	ter to the following:	
-	Mark	Name of Contact Person	<u>h</u>
_			
	1720 1	3elrede	re st.
_	15//a	hassel,	£1,32308
	100000	City/ State and Zip/Code	+ For il Com
	E-mail address: (to be us	sed for future annual report	notification)
		,	
For further information	concerning this matter, pleas	se call:	
100 0	/ Coch	9h at 850	29422//
Name o	f Contact Person	at ( A ) C Area Co	de & Daytime Telephone Number
Enclosed is a check for	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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
<u>Mail</u>	ing Address	<u>Street</u>	<u>Address</u>

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

## Articles of Amendment

to

/ 0	Articles of Incorporation  I of I			
Mark ( Be)	ran Enter	51.305		
(Name of Corpora	ion as currently filed with the Flor	ida Dept. of State)		<del></del>
P170000	7298			
(Doct	ment Number of Corporation (if know	vn)		
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	la Statutes, this Florida Profit Corpo	ration adopts the following	ıg amendi	meni(s) to
A. If amending name, enter the new name of the	orporation:			
			The n	ew
name must be distinguishable and contain the we "Corp.," "Inc.," or Co.," or the designation "Corword "chartered," "professional association," or the	p," "Inc," or "Co". A professiona		- bbreviati	ion
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AL		Bolvede	re	<u>n</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	1720	Belvede	; 3/e	56.
D. If amending the registered agent and/or regist new registered agent and/or the new registere		r the name of the		<del>-</del> -
Name of New Registered Agent				
		AHA HA	?; <b>* * * * * * * * * *</b>	TI
	(Florida street address)	SSE	-1	
New Registered Office Address:	(City)	, Florida	PH 1: 49	- D
		10 K	47F	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		bligations of the position.		
		·	_	
Sig	nature of New Registered Agent, if cl	hanging		

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 Doc	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	Desc Room	TOTAL
Remove		/
2) Change	Sv Lachary Coch	hven 1720 Belvedere 51 Tallahasach \$1,3230
Remove 3)ChangeAdd	SV Jemes D. Sim	mons 1720 Belvedere Tollahussey Fl, 3230
Remove 4) Change Add		) c //ahussey +1,3250
Remove		
5) Change Add		
Remove		
6) Change		
Add		

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)			
				<del></del>
				<del> </del>
	·			
<del>.</del>				
	<del></del>			
f an amendment provides for an exc provisions for implementing the ame	hange, reclassificat	on, or cancellation	on of issued share	<u>s,</u>
(if not applicable, indicate N/A)	indinent if not com	amed in the amer	idinent tesett.	
()				
· · · · · · · · · · · · · · · · · · ·				
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The date of each amendment(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 not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes east 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.
Dated3/7/18
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)
(Typed or printed name of person signing)
(Typed of printed name of person signing)

(Title of person signing)