PIDDDIB377

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(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
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(Bi	usiness Entity Nar	ne)
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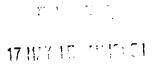
TO: Amendment Section Division of Corporations

100

NAME OF CORPOR	ATION: MOVEMENT SK	ATEBOARD COM	PANY.	, INC.
DOCUMENT NUMB	ER: P17000012377			
The enclosed Articles of	f Amendment and fee are sub	omitted for filing.		
Please return all corresp	ondence concerning this mat	ter to the following:		
J	AMES FISCHETTI			
-		Name of Contact	Person	
-		Firm/ Compa	any	
	01 OLD DIXIE HWY #3358	R		
]	UPITER/ FL 33469	Address		
_		City/ State and Zi	ip Code	 ;
POST	SKATEJUPITER@GMAIL.0	COM		
	E-mail address: (to be use	ed for future annual	report	notification)
For further information	concerning this matter, please	e call:		
JAMES FISCHETTI		at (61	
Name o	Contact Person	A	rea Coo	le & Daytime Telephone Number
Enclosed is a check for	the following amount made p	ayable to the Florid	a Depa	rtment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing For Certified Copy (Additional copy enclosed)		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ng Address adment Section ion of Corporations Box 6327 hassee, FL 32314]	Amendi Division Clifton	Address ment Section n of Corporations Building kecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



MOVEMENT SKATEBOARD COMPANY, INC.

(Name of Corporation as curren	tly filed with the Florida Dept. of State)	
P17000012377		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment	
A. If amending name, enter the new name of the corporation: POST SKATEBOARD COMPANY, INC		
	The new	
name must be distinguishable and contain the word "corporati "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	
B. Enter new principal office address, if applicable:	401 OLD DIXIE HWY #3358	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	JUPITER, FLORIDA 33469	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	401 OLD DIXIE HWY #3358	
	JUPITER, FLORIDA 33469	
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address		
Name of New Registered Agent		
401 OLD DIXIE HWY		
	treet address)	
HIPHI	33469	
New Registered Office Address:	(City), Florida	
New Registered Agent's Signature, if changing Registered Agen hereby accept the appointment as registered agent. I am familian		
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>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add		_		
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	(ве хресци)
N/A	
F. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

05/01/2017	10 4 4 4
	, if other than the
date this document was signed.	
05/01/2017 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 document's effective date on the Department of State's records.	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 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.	
action was not required.	
05/10/2017 Dated	
Signature 4.10. (By a director, president or other officer – if directors or officers have not been	
(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)	
JAMES M FISCHETTI	
(Typed or printed name of person signing)	
PST	
(Title of person signing)	