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	questor's Name)	
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(Cit	y/State/Zip/Phone #	()
PICK-UP	☐ WAIT	MAIL
	siness Entity Name	<u> </u>
(50	Sinoso Entity (Vallo)	,
(Do	ocument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	





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C. GOLDEN

DEC - 6 2017

COVER LETTER

TO: Amendment Section Division of Corporations Reid Armor PA NAME OF CORPORATION: _ DOCUMENT NUMBER: (17000 1311 4 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Rei 2 Almor NAI Southcoast

Firm/ Company

2055 5 Kanner Hwy, Stuart, FL 34994

Address Stuart, FL 34994 E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Rei 2 Armol at (772) 631 42 44

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S35 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

Articles of in	•
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Reiz Arma	2017 DEC = 1, PM 1
(Name of Corporation as current	tly filed with the Florida Dept. of State)
2000519) 13 11 4
	of Corporation (if known)
tursuant to the provisions of section 607,1006, Florida Statutes, this s Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(
. If amending name, enter the new name of the corporation:	
William Armor	The new
ame must be distinguishable and contain the word "corporatio" "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:	2055 S Kanner Howy
Principal office address <u>MUST BE A STREET ADDRESS</u>)	24000
	Stuary, FL 34994
Enter new mailing address, if applicable:	2000 5 V - 1000 11.11
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	2055 5 Kanner Hwy
	Stucity FL 34agx
	,,
. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	<u>s:</u>
Name of New Registered Agent	NA
art at the	
(r tortaa xt	reet address)
New Registered Office Address:	N ×
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registered Agent	
hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
	
Signature of New I	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	PT John	<u>ı Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		N &	NA
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			-
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
•		NIA
		
	-	
		
	==	
an amendment provides for an exch	ange, reclassific	ation, or cancellation of issued shares,
provisions for implementing the amer	ndment if not co	ntained in the amendment itself:
(if not applicable, indicate N/A)		
	<u>4</u> u	
	- N- FX	

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 a 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.	
Dated 11/27/2017	
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)	
Roid Ninger	
(Typed or printed name of person signing)	
Rics: 20n-	
(Title of person signing)	_