## P1700013330

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R. WHITE

## **COVER LETTER**

TO: Amendment Se Division of Cor			3
NAME OF CORPO	DRATION: 49th MOBIL INC		
DOCUMENT NUN	4BER: P17000013330		
	es of Amendment and fee are su	ibmitted for filing.	
Please return all corr	respondence concerning this ma	atter to the following:	
	PATRICK KO		
		Name of Contact Perso	n
		Firm/ Company	
	2525 N TAMIAMI TRAIL		
		Address	
	SARASOTA, FL 34234		
		City/ State and Zip Cod	e
GA	STOGO9112@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
PATRICK KO		at (813	992-7185 de & Daytime Telephone Number
Name	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

## Articles of Amendment to Articles of Incorporation of

49TH MOBIL INC		17	HAY II P	H12: 20
(Name o	of Corporation as currently			
P17000013330		# '# * 1 * 1		
	(Document Number of C			
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this F	Jorida Profit Corporation :	adopts the follo	wing amendment(s)
A. If amending name, enter the new na	ame of the corporation:			
				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	o". A professional corpo		
3. <u>Enter new principal office address,</u> Principal office address <u>MUST BE A S</u>				
C. Enter new mailing address, if appli (Muiling address MAY BE A POST)				
			<del></del>	
				<del></del>
D. If amending the registered agent an new registered agent and/or the ne		ss in Florida, enter the na	me of the	
Name of New Registered Agent				
	2525 N TAMIAMI TRAIL			
	(Florida stree	et address)		
New Registered Office Address:	SARASOTA		, Florida	
	10	City)		Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agent:		•	
hereby accept the appointment as regis.	tered agent. I am familiar wi	ith and accept the obligation	ons of the positi	on.
<del></del>	Signature of New Re	oistered 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.

X Change	<u>PT</u>	John De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
_X Add	<u>sv</u>	Sally S	mith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		<del>-</del>		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
<b>A</b> dd				
Remove				
5) Change		_		Verification of the control of the c
Add				
Remove				4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
6) Change		_		
Add				
Remove				

•	f amending or adding additional Articles, enter change(s) here:  Attach additional sheets, if necessary). (Be specific)				
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		<del></del>		7-48	
	-				
	Att 17 - tot				
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				***************************************	
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on amandmant and the	s for an exchange, re ling the amendment	<u>classification, or ca</u> if not contained in t	ncellation of issued he amendment itsel	<u>shares,</u> f:	
<u>rovisions for implement</u>					
rovisions for implement (if not applicable, indi	icate N/A)				
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rovisions for implement	icate N/A)				
rovisions for implement	icate N/A)				
<u>provisions for implement</u>	icate N/A)				

The date of each amendmen date this document was signed	•	, if other than th
Effective date if applicable:	MAY 8TH, 2017	
Entective date in applicable.	(no more than 90 days after amendment file date)	<del> </del>
	this block does not meet the applicable statutory filing requirements, this da he Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendment(ere sufficient for approval.	s)
	re approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	ent
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
MAY Dated	8TH, 2017	
Dateu		
X Signature _	MATTER	
Se	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other components of fiduciary by that fiduciary)	rt
a		
	PATRICK KO	
	(Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
	(Title of person signing)	
	(Title of person signing)	