P1700017246

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C. GOLDEN

DEC - 6 2017

COVER LETTER

Division of Corporations NAME OF CORPORATION: Core Hosting Corporation P17000017246 DOCUMENT NUMBER: __ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Christopher Ross
Name of Contact Person Core Hosting Corporation 705 N. Himps Ave Tam, x FL 33609 City/ State and Zip Code CJORDAN ROSS @ GMAIL. COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Grea Zacharias
Name of Contact Person at (<u>\$13</u>) <u>Z54-320(e</u> 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 Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address Mailing Address

TO: Amendment Section

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



November 14, 2017

CHRISTOPHER ROSS 705 N. HIMES AVENUE TAMPA, FL 33609

SUBJECT: CORE HOSTING CORPORATION

Ref. Number: P17000017246

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You can check only one (1) box regarding the adoption of amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 717A00023068

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www.sunbiz.org

A. If amending name, enter the new name of the corporation: The new many be distinguishable and contain the word corporation: Corp.—Inc., or Co., or the designation "Corp., Inc., or To., I professional corporation name must contain the word chartered professional association, or the abbreviation P 3. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				FILE	ED
(Name of Corporation as currently filed with the Florida Dept. of State) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendments its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the seard corporation company, or incorporated or the abbreviation Corp. Inc. or Co. Uprofessional corporation name must contain the word character? professional association is the abbreviation P. 1. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOS) D. If amending the registered agent and/or registered office address: Name of New Registered Agent Creg. Zachasias Zoz. 3. Zone. Ave. Ste. 1600 Though Survey states.	,	to		2017 DEC -5	AM 10: 44
Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendments its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word corporation: The new name must be distinguishable and contain the word corporation: Cop. In., "or Co.," or the designation "Corp." The or "Co. Professional corporation name must contain the word chartered" professional association. To the abbreviation P.1. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Whiling address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent Treg. Zacha NaS. ZOZ S. Zone. Ave. Ste. 1600 Florida successibilities.	Core Hosting Co.	roitorogy		of State)	
A. If amending name, enter the new name of the corporation:	61150000 11911P	nent Number of Corporatio	n (if known)		
The new mast be distinguishable and contain the seard corporation company, or incorporated or the abbreviation Corp. Inc. or Co. A professional corporation name must contain the word chartered professional association. The activation P. C. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOS) D. Hamending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent Creg. Zacha Na. ZOZ. S. Rome. Ave. Stc. 1600 (Planda successidess)		a Statutes, this <i>Florida Pro</i>	fit Corporation ado	opts the following a	amendment(s) to
D. Hamending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered agent and/or the new registered office address: Name of New Registered Agent Oreg Zacha rids To He abstraction of the abbreviation of t	A. If amending name, enter the new name of the co	orporation:			
(Principal office address MUST BE A STREET ADDRESS) (Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent Greg Zacharias ZOZ & Rome Aue. She 160	Corp. Inc.," or Co.," or the designation "Corp.	Carlos or Con Apri		ated or the abb	reviation
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent Greg Zacharias ZOZ S. Rome, Auc., Ste. 160 (Florida, succeraddress)				- 	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent Greg Zacharias ZOZ S. Rome, Ave., Ste. 160 (Florida, succeradatess)					
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Name of New Registered Agent Greg Zacharias 702 3 Rome Aug. Ste 160					
702 g. Rome Ave. Ste 160			ida, enter the name	e of the	
el-landa succeadatresso	Name of New Registered Agent Greg	Zacharias			
New Registered Office Address: _ Tampa . Horida 3360Ce 12th Codes	707 5	G. Rome Av	c. Ste 160	·)	
	New Registered Office Address:	Tampe		Florida <u>33.60</u> <i>i Zip</i> Co	Ce ulci

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the approximent as registered agent. I am lamiliar with and accept the abligations of the position

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 Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			·
Add			
Remove			
Observation (Character)			
4) Change			
Add			_
Remove			
5) Change			
Add			
Remove			
6) Channa			
6) Change			
Add			
Remove			

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an amendment prov	ides for an exchan	ge, reclassificat	ion, or cancellat	ion of issued sha	ares,
orovisions for implen (if not applicable,	nenting the amendi	ment if not cont	tained in the am-	engment itseir:	
(у погаррисате,	maicure 1974)				
		-			
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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: 1/// / 7 (no more than 90 days after amendment file date)	<u> </u>
(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 discomment's effective date on the Department of State's records.	ate 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(by the shareholders was/were sufficient for approval.	(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"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 sharehold action was not required.	er
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Detect 1/1/2/17	
Signature (By a director, president or other officer – if directors or officers have not been	
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 cou	rt
appointed fiduciary by that fiduciary)	
Christopher J. Russ (Typed or printed name of person signing) President	
(Typed or printed name of person signing)	
Daniela L	
1 1010KAT	

(Title of person signing)