P17000025528

(Re	equestor's Name)
(Ad	dress)
(Ad	ddress)
(Cit	ty/State/Zip/Phone #)
PICK-UP	MAIL MAIL
(Bu	isiness Entity Name)
(Do	ocument Number)
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SECRETARY OF STATEMENT OF STATEM

Amend

APR 0.5 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section

Division of Corporations Business Listing Support, Inc. NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jeffrey S Dougan Name of Contact Person Business Listing Support, Inc. Firm/ Company 4400 North Federal Highway, Suite 44 Address Boca Raton, Florida 33431 City/ State and Zip Code jeffreydougan@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jeffrey Dougan Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** 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 **Division of Corporations** Clifton Building P.O. Box 6327

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

Business Listing Support, Inc.	
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P17000025528	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	ASE III
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	ASS.
	mo - m
D. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida str	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent	
I hereby accept the appointment as registered agent. I am familiar	
	· · · · · · · · · · · · · · · · · · ·
61 , C11 T	Desired Acres 16 Leaving
Signature of New K	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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	Stephanie A Dougan	610 West Las Olas Blvd
X Add			#1818N
Remove			Fort Lauderdale, FL 33312
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional si	ding additional Article heets, if necessary). (Be specific)	- <u></u> -		
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provisions for imp	rovides for an exchang elementing the amenda ble, indicate N/A)	ge, reclassification, on ment if not contained	or cancellation of issi i in the amendment i	ted shares, tself:	
			·····		<u>-</u> -

	March 28, 2017	
The date of each amendment(s) at date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	· · · · · · · · · · · · · · · · · · ·
Note: If the date inserted in this bedocument's effective date on the De	plock does not meet the applicable statutory filing requirements, this date we partment of State's records.	rill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) efficient for approval.	
	proved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
March 28,	2017	
Signature	they & hours	
(By a/d) selected	frector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court led fiduciary by that fiduciary)	
	Jeffrey Dougan	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	