## P17000028571

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## **COVER LETTER**

TO: Amendment Sect Division of Corpo				
	RATION: COUL			
DOCUMENT NUMI	BER: <u>P170000</u>	18571		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	;	
Please return all corres	spondence concerning this ma	itter to the following:		
	ANTHONY	GRANT Name of Contact Perso		
		Name of Contact Perso	n d	
	Con	L NYGES THE		
		L 1966 INC	. c/a · l ·	
			A.G. 10/30/17	
	OUSS CHALE	PIDGE TR #	07CM100 57818	-
		Address		
	DRINDO, F	L. 32818 City/ State and Zip Cod		
	,	City/ State and Zip Cod	e	
	COLVリモS のな E-mail address: (to be us	28 (3 GMAIL · (seed for future annual report	notification)	1
For further information	n concerning this matter, pleas	se call:		,
ANTHONY	GRANT	au 407	1 219 - 8477	!
ANTHONY GRANT Name of Contact Person		at (407) 219 - 8477  Area Code & Daytime Telephone Number		_
	r the following amount made p			1
S35 Filling 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		Street Address		,
Ame	ndment Section	Amend	lment Section	
	sion of Corporations		on of Corporations	
	Box 6327	Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		

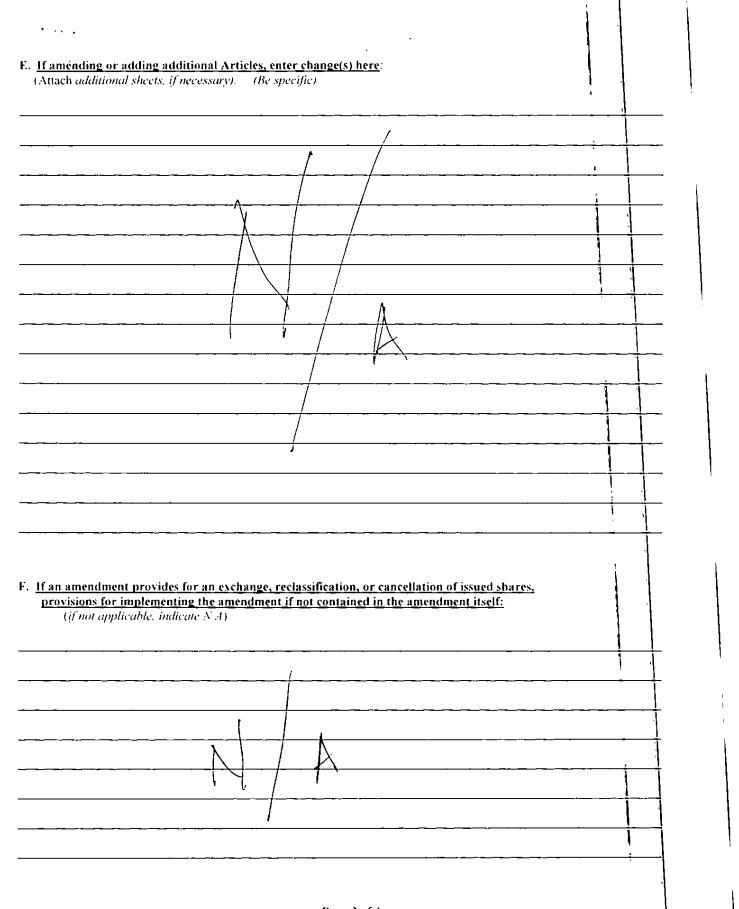
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

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a Dent, of State)/3	<b>7</b> /4

COOL VYBES T	MC	146.6	PHO
(Name of Corporation as currently	filed with the Flo	orida Dept. of Sta	(é) (3)
P17000028571			
(Document Number of	Corporation (if kn	own)	12
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Torida Profit Corp	ooration adopts the	: following amendment(s)
A. If amending name, enter the new name of the corporation:			1 1
NA			
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "I	'o". A profession		or the abbreviation
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u> )			
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	5673 ORLA	SHALE PI	25 TK
D. If amending the registered agent and/or registered office address:  new registered agent and/or the new registered office address:	ess in Florida, ento	er the name of the	
Name of New Registered Agent			
	RIDGE TI	۷	
tFlorida stree	rt address)		1 1
New Registered Office Address: DYLANDO	, t	, Florida	<del></del>
n n	City)		(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wo	ith and accept the d	obligations of the p	position.
Signature of New Re	gistered Agent, if c	hanging	

			1 1	
address of each Office (Attach additional she Please note the officer P = President; V = Vic Executive Officer; CF held, President, Treast Changes should be no a change, Mike Jones	er and/or I ets, if neces, director tit ce Presiden TO = Chief urer, Direct ited in the fo	sary) le by the first letter of the office title; t; T=Treasurer; S=Secretary; D=Director; TR=Ti Financial Officer. If an officer/director holds more t	rustee; C - Chairman or Clerk; CEO = Chief han one title, list the first letter of each office PST and Mike Jones is listed as the V. There is	
X Change	<u>b1</u> .	John Doe		
X Remove	$\underline{\mathbf{V}}$	Mike Jones	<u> </u>	
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) Change	1	SULATMAN POWELL	1079 ROYAL MARGUES COX	
<u>★</u> Add			DCDEE, FL. 34761	
Remove				
2) Change		N/A	k)/A/	
Madd				
Remove		1	,	
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4) Change	<del></del>			
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MA vaa				1
Remove		1.7		
6) Change		N/A	J/ A	
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		Page 2 of 4		
				- 1



11/07/2017 11:43 4076105	5842	OCOEE MAIL CENTER	PAGE 02/02
The date of each amendment(s) a date this document was signed.	doption:	N/A	10 3 20 7
Effective date if applicable:		Í,	
	(no more than	90 days after amendment file date,	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the appl partment of State's records.	icable statutory filing requirement	s. this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		'
The amendment(s) was/were adop by the shareholders was/were suf	arod by all and a	e number of votes east for the ame	ridment(s)
☐ The amendment(s) was/were appromust he separately provided for e	oved by the shareholders threach voting group entitled to	ough voting groups. The following vote separately on the amendment	
"The number of votes cast fo	ir the amendment(s) was/wer	e sufficient for approval	1976
by	(voting group)		
<ul> <li>The amendment(s) was/were adopted action was not required.</li> <li>The amendment(s) was/were adopted action was not required.</li> </ul>			i i
Dated_10/30	12017	<u></u>	
Signature Auto By a direct sclected, by appointed f	Or provident or all	- if directors or officers have not ands of a receiver, trustee, or other	been Court
~	(Typed or printed nan	GRANT  De of person signing)	
	Page	ESCHELT	
	(Title of p	erson signing)	