

(Requestor's Na	ame)
(Address)	
(Address)	<del></del> -
,	
(City/State/Zip/l	Phone #)
PICK-UP WAI	T MAIL
(Business Entit	y Name)
(Document Nur	mber)
Certified Copies Certif	icates of Status
Special Instructions to Filing Office	er.

Office Use Only



200306393612

12/12/17--01017--025 \*\*\$2.50

77 · · · 1316

3000 = 1**\*** 



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION: UNST	OPPABLE	RESPONSE
DOCUMENT NUMBI	シイフ	0000317	59
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
	KEU	Name of Contact Person	T
_		Name of Contact Person	
_	TZNU	OFPABLE	RESPUNSE
		Firm/ Company	
	1510 WW	DSHIP CIR	CCLE
_		Address	
_	MELLING	STON FL	33414
		City/ State and Zip Code	<u> </u>
	KEVINO	2 APROTZ MU	SLERESPONSE.COM
	E-mail address: (to be us	ed for future annual report	notification)
	concerning this matter, pleas		
KEVIN	BOVETT	at ( <u>561</u>	) 291 3514 de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:
☐ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee &	Certificate of Status Certified Copy (Additional Copy is enclosed)
<u>Maili</u>	ng Address	Street	Address

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

## Articles of Amendment to Articles of Incorporation of

(Name of	Corporation as currently	filed with the Florida Dept. of State)		
UnStoppable Response Inc.	P170000317	759		
	(Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes, this $F$	Ilorida Profit Corporation adopts the following amendm	ient(s) to	
A. If amending name, enter the new name	e of the corporation:			
		The ne		
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designat word "chartered," "professional association	ion "Corp." "Inc." or "C	." "company," or "incorporated" or the abbreviation". A professional corporation name must contain the P.A."	n ie	
B. Enter new principal office address, if	applicable:	1510 WINDSHIP CIRCL	E	
(Principal office address MUST BE A STE		WELLINGTON FL		
		33414		
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		1510 WINDSHIP CIRC	LE	
(Making marks) MAY BEAT OST OFFICE BOX		WELLINGION FL		
		33414		
		33-11-4		
D. If amending the registered agent and/ new registered agent and/or the new		ess in Florida, enter the name of the		
Name of New Registered Agent	KCUIN	BOVETT		
Name of New Regimerea Agena				
-	(Florida stree	NDSHIP CIRCLE		
New Registered Office Address:	LUELLIN	City) Florida 33416	4	
	((	City) (Zip Code)		
New Registered Agent's Signature, if cha	inging Registered Agent:			
		ith and accept the obligations of the position.		
	/_ /			
	K/Sc			
	Signature of New Re	gistered 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			
$\underline{X}$ Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address	
1) Change	P/S	CHERY	T. ALKER	 14324 Paddock Drive	
Add				Wellington	
X Remove				Florida, 33414	
2) Change				 	
Add					
Remove					
3) Change					
Add					
Remove					
4) Change	<del></del>			 	
Add					
Remove					
5) Change		_		 	
Add					
Remove					
6) Change		_		 	
Add					_
Remove					

f amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)				
				<u></u>	
· · · · · · · · · · · · · · · · · · ·					
<del></del>	<del></del> .	_			
		<u> </u>		. <u> </u>	
		<del></del> .			
		<del>.</del>			
<del> </del>					
f an amendment provides for an exch	ange, reclassifica	ation, or cancella	tion of issued sh	ares.	
provisions for implementing the amer	ndment if not co	tained in the an	endment itself:		
(if not applicable, indicate N/A)					
	<u>-</u>			·	
· · · · · · · · · · · · · · · · · ·					
				<del></del> _	
				- <del>-</del>	_
					_

The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date <u>if applicable</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 document's effective date on the Department of State's records.	late 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 east 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 staten must be separately provided for each voting group entitled to vote separately on the amendment(s):	чет
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	der
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated $12/10/2017$	
Signature Such	
(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 co-appointed fiduciary by that fiduciary)	
KEVIN BOVETT	
(Typed or printed name of person signing)	<del></del> _
VICE PRESIDENT	
(Title of person signing)	