Pnon 40408

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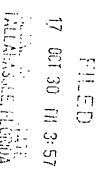
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NOV 0 1 2017 S. YOUNG



COVER LETTER

Division of Corporations
NAME OF CORPORATION: MARTINS CONCEPT INC DOCUMENT NUMBER: P17000040408
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ERIKA CANHERO
FIE FINANCIAL SERVICES LCC PO BOX 2012
WOOCK / GA 30188 City/ State and Zip Code
E-mail address: (to be used for future annual report notification) E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ELIKA CUHERO at 1 Lo 2 , Lo 43 - D7 1 / Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) 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 Tallahassee, FL 32301

Articles of Amendment

to Articles of Incorporation of

P1700004	tion as currently fi 40408 ment Number of Co					
Pursuant to the provisions of section 607,1006, Floridits Articles of Incorporation:		,		llowing ame	endmei	nt(s) to
A. If amending name, enter the new name of the c	corporation:					
				The	new	
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the B. Enter new principal office address, if applicab (Principal office address MUST BE A STREET AD	p." "Inc," or "Co" we abbreviation "P.A de:	. A professional c				
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE Bo</u>	- <u>OX</u>) -			Ē	77	
D. If amending the registered agent and/or registered new registered agent and/or the new registered	ered office address d office address:	in Florida, enter tl	e name of the		OS 10	
Name of New Registered Agent				<u> </u>	<u>=</u> دی	·'
· · · · · · · · · · · · · · · · · · ·	(Florida street e	iddress)	- 1-	<u> </u>	٠. ان	
New Registered Office Address:	(Cit	v)	, Florida	(Zip Code)	_	
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	egistered Agent: I am familiar with	and accept the oblig	gations of the pos	ition.		

Signature of New 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> <u>Johr</u>	<u>ı Doc</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	v Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	Flavio Dias_	302 Charry Way
Add			Saint Johns, FL 33
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			,
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

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		 	<u></u>		

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 date vidocument's effective date on the Department of State's records.	vill 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(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 10 23 20 1	
Signature	
(By adjected, president or other of the - if directors or officers have not been	
selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
LICIAO Nicas	
-10110 DIW	
(Typed or printed name of person signing)	
Vice Mesident	
(Title of person signing)	