

(Requestor's Name) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	(Requestor's Name)	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status		
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status		
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	, ,	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status		
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)	
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status		
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City/State/Zip/Phone #)	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status		
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	☐ PICK-UP ☐ WAIT	☐ MAIL
(Document Number) Certified Copies Certificates of Status		
(Document Number) Certified Copies Certificates of Status		
Certified Copies Certificates of Status	(Business Entity Name)	
Certified Copies Certificates of Status		
Certified Copies Certificates of Status	(Decument Number)	
	(Eccument Number)	
Special Instructions to Filing Officer:	Certified Copies Certificates of S	tatus
Special Instructions to Filing Officer:		
Special Instructions to Filing Officer:		1
	Special Instructions to Filing Officer:	
·		i
		ŀ
		1

Office Use Only



000301232100

07/13/17--01005--021 **35.00

JUL 1 8 2017 S. YOUNG



COVER LETTER

TO: Amendment Section Division of Corporations

E.D.B.L. INC	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee a	re submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Albert B. Maggio, Jr.	
CRGO Law	Name of Contact Person
7900 Glades Road, Suite	Firm/ Company : 520
Boca Raton, FL 33449	Address
	City/ State and Zip Code
troyganter@yahoo.com	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter,	please call:
Albert B. Maggio, Jr.	561 922-3836 at ()
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount m	ade payable to the Florida Department of State:
\$35 Filing Fee	
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 E.D.B.L. INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P170000)45054		
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this aits Articles of Incorporation:	Florida Profit Corporation adopts the fo	llowing amer	ndment(s) t
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 "	Co". A professional corporation name	the abbrevi	ation
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: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address: Name of New Registered Agent		A A CONTRACTOR OF THE A CO	17 JULIO 6: 3:38
(Florida sir	and the second		
	eer autress)		
New Registered Office Address:	(City) . Florida_	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. Tam familiar w		ition,	
Signature of New R	egistered 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: <u>X</u> Change	<u>PT</u>	John De	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove				
3.) Change				
Add		_		
Remove				
1) Change				
4) Change		_		
Add				
Remove				-
5) Change		_		
Add				
Remove				
(1)				
6) Change		_		
Add				
D arrange				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Article III is hereby amended as follows: ARTICLE III
ARTICLE III
PROVIDE MANAGEMENT CONSULTING AND RELATED SERVICES, AND ANY AND ALL LAWFUL PURPOSES

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)
-

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
5		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment officient for approval.	(s)
	proved by the shareholders through voting groups. The following statem 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	<u>.</u>	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and sharehold	ler
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
June 29, 2	017	
Dated		
Signature		
(By a c selecte	lifector, president or other officer – if directors or officers have not been ad, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	
	Troy Ganter	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	-