P17000051025

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: LGL Inc.				
DOCUMENT NUMB	ER: P17000051025	· · ·			
The enclosed Articles of	of Amendment and fee are sul	omitted for filing.			
Please return all corres	pondence concerning this mat	ter to the following:			
	Maureen Butler				
-		Name of Contact Person	1		
	LGL Inc				
-	Firm/ Company				
	PO BOx 6354	·			
•		Address			
	Massena NY 13662				
•	<u> </u>	City/ State and Zip Code	2		
			•		
	er@laframboise.net	ed for future annual report	notification)		
	E-man address. (to be us	ica for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
Maureen Butler		at (613	933-6664		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State;		
■ \$35 Filing 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)		
Ame Divi P.O.	ling Address Indment Section Ision of Corporations Box 6327 Islanssee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation of

LGL Inc	
(Name of Corporation as	currently filed with the Florida Dept. of State)
P17000051025	
(Document N	lumber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	ates, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpora	ation:
N/A	The new
	orporation," "company," or "incorporated" or the abbreviation nc." or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A S)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent N/A	
(1	Florida street address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registere	(City) (Alto Code) WAR T
I hereby accept the appointment as registered agent. I am	familiar with and accept the obligations of the position.
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>	John Doe	
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>	<u>Addres</u> s
l)Change	•		
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
S) Change			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	Cies, enter change(s) nere: (Be specific)
N/A	
,	
	· · · · · · · · · · · · · · · · · · ·
E. If an amandment provides for an evel	
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an analysis of the same
(if not applicable, indicate N/A)	
The corporation will be allowed to issue 50	non-voting, preferred shares.
	

<u> </u>	February 9, 2018	
	t(s) adoption:	_, if other than the
date this document was signed	l.	
F100 (1 1 1 10 11 11	February 9, 2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	,	
	this block does not meet the applicable statutory filing requirements, this date will rethe Department of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	19	
	(voting group)	
action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
Febru Dated	uary 9, 2018	
Signature _	(Mand.	
	By a director, president or other officer – if directors or officers have not been	-
	elected, by an incorporator - if in the hands of a receiver, trustee, or other court	
a	ppointed fiduciary by that fiduciary)	
	Michael Laframboise	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	