## P11000059645

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11/28/18--01010--002 \*\*35.00



Amend

DEC 0 6 2018

I ALBRITTON

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	Discover Downtown	Clumout the
DOCUMENT NUMBER:	P1700005964	
The enclosed Articles of Amendmo	nt and fee are submitted for filing.	
Please return all correspondence ec	ncerning this matter to the following:	
	Pine Stance,	<del></del>
	value of Confact Ferson - V	y.
	Firm/Company PO Box 1205	. <i>8</i>
	Address  Clumbal F  City/ State and Zip Code	34712
E-mail	unle optima one ( address: to be used for future annual report notif	gamail.com
For further information concerning	this matter, please call:	
Name of Contact Pe	rson at (239)	220-7271 Daytime Telephone Number
	g amount made payable to the Florida Departme	
——————————————————————————————————————	icate of Status Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Sect Division of Corp P.O. Box 6327 Tallahassee, FL	on Amendment orations Division of Clifton Buil	t Section Corporations

Tallahassee, FL 32301

## Articles of Amendment

to

## Articles of Incorporation

of

(Name of Corpora	ation as currently filed with the Florida Dept. of State)
(Doc	rument Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florits Articles of Incorporation:	rida Statutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the	corporation:
	The new cord "corporation," "company," or "incorporated" or the abbreviation orp," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applical (Principal office address <u>MUST BE A STREET AI</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	FILE D
D. If amending the registered agent and/or regist new registered agent and/or the new registere	tered office address in Florida, enter the name of the ed office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent.	degistered Agent: t. I am familiar with and accept the obligations of the position.
	anature of New Registered Agent if shapping

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>Joh</u>	in Dog	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	19	Chris Garcia	_650 84m St
_XAdd			Clermont, Fr
Remove			3471
2) Change			
Add			
Remove			
3.) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			· 
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	<u> </u>
<u>.</u>	
	<u> </u>
	<del></del>
<u> </u>	
If an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: 11/20/18, if other than the date this document was signed.
Effective date if applicable: 11 20118  (no more than 90 days after amendment file date)
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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
☐ 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.
Signature  (By a director, president or other officer = if directors or officers have not been
(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 court appointed fiduciary by that fiduciary)
Aimee Stanley
(Typed or printed name of person signing)
President
(Title of person signing)