P17000060009

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SECRETARY OF STATE TAIL ALLASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

F

NAME OF CORPORAT	TON: DON'T BE A GAS	HOLE, INC.				
DOCUMENT NUMBER						
The enclosed Articles of A	mendment and fee are su	bmitted for filing.				
Please return all correspon	dence concerning this mat	ter to the following:				
NA	THAN GREEN					
	Name of Contact Person					
GR	GREEN SOLUTIONS ACCOUNTING FIRM, INC.					
	Firm/ Company					
140	1404 NORTH RONALD REAGAN BLVD, SUITE 1120					
		Address				
l.0	NGWOOD, FL 32750					
		City/ State and Zip Code	;			
NGREEN	r@GREENSACCOUNTE	NG.COM				
	-	sed for future annual report	notification)			
	ncerning this matter, pleas		212 14112			
NATHAN GREEN	·	at () 363-4982 de & Daytime Telephone Number			
Name of C	ontact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for the	e following amount made	payable to the Florida Depa	irtment of State:			
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314		Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle USSEC, FL 32301			

Articles of Amendment to Articles of Incorporation of

DON'T BE A GASHOLE, INC.

(Name of Corporation	n as currently filed v	vith the Florida Dept.	of State)	
P17000060009				
(Docume	ent Number of Corpor	ration (if known)		
Pursuant to the provisions of section 607.1006, Floridal its Articles of Incorporation:	Statutes, this <i>Florida</i>	Profit Corporation ado	pts the following amo	endment(s) to
A. If amending name, enter the new name of the cor	poration:			
N/A			The	new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp.," word "chartered," "professional association," or the a	" "Inc." or "Co". 🗵		ated" or the abbrev	riation
B. Enter new principal office address, if applicable:	N/A			
(Principal office address MUST BE A STREET ADDI			- ··-	
				_ _
C. Enter new mailing address, if applicable:	N/A			
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>			
	_			-
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		Florida, enter the name	e of the	
N/A	office address.			
Name of New Registered Agent	· · · · · · · · · · · · · · · · · · ·			
	(Florida street addr	(ess)		
New Registered Office Address:		,	Florida	
	(City)		(Zip Code))
New Registered Agent's Signature, if changing Regi- I hereby accept the appointment as registered agent.		d accept the obligations	of the position.	
, nevery 2007, never approximation of the second	,		` AE 281	
			Can Ta	
			AHAS AHAS AHAS AHAS AHAS AHAS AHAS AHAS	
Signo	iture of New Register	ed Agent, if changing		1
			L., (\)	
			954 ± 1	

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	
1) X Change	P	WAYNE C. SMALL	247 PARK AVENUE	
Add			LONGWOOD, FL 32750	
Remove				
2) X Change	VΡ	JENNIFER L. SMALL	247 PARK AVENUE	
Add	-		LONGWOOD, FL 32750	
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 sheefs, if necessary). (Be specific)		
/A		
-		
. <u>If an</u>	amendment provides for an exchange, reclassification, or cancellation of issued shares, issued shares.	
prov	(if not applicable, indicate N/A)	
/A		
·-		
		

07/18/2017	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
07/18/2017	
Effective date if applicable:	
(no more than 90 day	es after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	nber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes east for the amendment(s) was/were suf	Ticient for approval
by	·•
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors with action was not required.	out shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without action was not required.	shareholder action and shareholder
07/17/2017 Dated	_
Signature (By a director, president or other officer – selected, by an ineurporator – if in the har appointed fiduciary by that fiduciary)	
JENNIFER L. SMALL	
(Typed or printed name	e of person signing)
VICE PRESIDENT	
(Title of pe	erson signing)