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COVER LETTER

TO: Amendment Section Division of Corporations						
NAME OF CORPORATION: WIFI	my/IFEIINU.					
DOCUMENT NUMBER: P(700	00'068658					
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this mat	tter to the following:					
Pauli	Name of Contact Person					
Firm/ Company						
590.	JOHN RODD					
•	Address					
- Ton	Address A FL 33634 City/ State and Zip Code					
·	City/ State and Zip Code					
E-mail address: (to be use	ed for future annual report notification)					
For further information concerning this matter, please call: Auline -24 Both at (6/3), 731-0370						
Name of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made p	payable to the Florida Department of State:					
\$35 Filing Fee Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)					
Mailing Address	Street Address					
Amendment Section Division of Corporations	Amendment Section Division of Corporations					
P.O. Box 6327	Clifton Building					
Tallahassee, FL 32314	2661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

41/1	mulite IN				
	tion as currently filed with the F	lorida Dept. of State	e)		
P17001	06865-8		_		
	ment Number of Corporation (if k	nown)			
Pursuant to the provisions of section 607.1006, Floric its Articles of Incorporation:	da Statutes, this Florida Profit Co	rporation adopts the	following	, ameno	dment(s) to
A. If amending name, enter the new name of the c	corporation:				
				The i	new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	p," "Inc," or "Co". A professio				
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET AD</u>					_
					_
				<u>. </u>	_
C. Enter new mailing address, if applicable:				<u> </u>	
(Mailing address MAY BE A POST OFFICE BO	<u> </u>				
			: <u>:</u> :	√	
			••	727	TTI
D. 16			35. 	۹	- (-)
D. If amending the registered agent and/or registered new registered agent and/or the new registered		iter the name of the		==	
Name of New Registered Agent			Ξ΄.	-	
Name of New Neglinered Agent					
	(Florida street address)				
New Registered Office Address:	,	والمستاع			
New Registered Office Address.	(City)	, Florida	(Zip Ce	ode)	_
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.		e obligations of the p	osition		
	yamma mi ana accept ne	z zonganona vy me p			
·		T. E.			
Sigi	nature of New Registered Agent, i	j enanging			

Attach addition	adding additional Ai al sheets, if necessary)	(Be specific)	ze <u>(s) nere</u> :			
						
	THIS	15 T	O Re	Z/EC	T C	1 tanla
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<u>fan amendme</u> provisions for	nt provides for an ex- implementing the an	<u>change, reclassific</u> rendm e nt if not co	ation, or cancell intained in the a	<u>ation of issued</u> mendment itse	d shares, elf:	
	licable, indicate N/A)					
		NA				
		V 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	PT John Doe	
X Remove	V Mike Jones	
_X Add	SV Sally Smith	
Type of Action (Check One)	Title Name Address A	V
1) Çhange	PVST Phitting promus 12749 W HillsBonet	7
_V Add	Richard Cartagena 12749 W HillsBonner Ste B	?7
Remove	STE B	
2) Change		
Add		
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

The date of each amendment(s) adoption: FEB 21, 2018 date this document was signed.	if other than the
•	
Effective date if applicable: (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 wideoument's effective date on the Department of State's records.	Il not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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. Dated 121 70/8	
Signature	
(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)	
Psulm FEBCh	
(Typed or printed name of person signing)	
WH Cupu	
(Title of person signing)	