## 91700088353

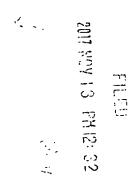
(Requestor's Name)
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(Business Entity Name)
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	TION: CAPELLA PHOTO	O. INC	
DOCUMENT NUMBE	P17000088353		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ndence concerning this ma	tter to the following:	
JC	DEL FRIEND		
		Name of Contact Persor	1
JC	DEL FRIEND & ASSOCIA	TES INC	
-		Firm/ Company	
28	63 EXECUTIVE PARK D	DRIVE# 105	
<del></del>		Address	
W	ESTON FLORIDA 33331		
_		City/ State and Zip Code	e
JOEL@	JOELFRIEND.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information c	oncerning this matter, pleas	se call:	
JOEL FRIEND		at ( <u>95</u> 4	704-1040
Name of (	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	ne following amount made	payable to the Florida Depa	artment of State:
S35 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address  Iment Section  on of Corporations  Building  Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment** to Articles of Incorporation

FILED

(Name of Corporation a	
· · · · · · · · · · · · · · · · · · ·	as currently filed with the Florida Dept. of State)
P17000088353	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Stats Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpo	oration:
CAPPELLA PHOTO, INC	The new
	'corporation," "company," or "incorporated" or the abbreviation 'Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<del></del>
). If amending the registered agent and/or registered	
new registered agent and/or the new registered offi	
new registered agent and/or the new registered offi	
Name of New Registered Agent	(Florida street address)
Name of New Registered Agent	(Florida street address)

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 Do	<u>u</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>		Name	Address
1) Change		_		
Add				
Remove				
2) Change				
Add		_		
Remove				
3 ) Change				
Add		_		*
Remove				
<del>-</del>				
4) Change		_		
Add				
Remove				<u>-</u>
5) Change		_		
Add		_		
Remove				
6) Change		_		
Add				·
Remove				

Attach additional sheets, if necessary).	(Be specific)		
		, <u>, , , , , , , , , , , , , , , , , , </u>	
		•	
f an amendment provides for an excl	aango reelassification or	cancellation of issued share	pe
provisions for implementing the ame	ndment if not contained in	n the amendment itself:	<u></u>
(if not applicable, indicate N/A)			
	·-···		
		·-	

The date of each amendment(s) adoption:	, if other than
• • •	
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 document's effective date on the Department of State's records.	e will not be listed as
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.	ı
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	и
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(Voting group)	
☐ 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 or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court	<del></del>
appointed fiduciary by that fiduciary)	
DIEGO CAPPELLA	
(Typed or printed name of person signing)	
PRESIDENT	

the

the

(Title of person signing)