0120000000005

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress) .	_
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300316144043

07/30/18--01008--011 **35.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

FILED

755 **0** ± 753



COVER LETTER

TO: Amendment Section Division of Corporations

1

NAME OF CORPORA	ATION: TOP OPS, INC.			
DOCUMENT NUMBI	P18000001095		. <u>.</u>	
The enclosed Articles of	Amendment and fee are su	abmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
S	am Martin			
_		Name of Contact Perso	n	
Т	OP OPS, INC.			
. –		Firm/ Company		
4	110 Center Point Drive, S	Suite 216		
_		Address		
F	ort Myers, FL 33916			
_		City/ State and Zip Cod	le	
Sam.M	lartin@TopOpsUSA.com			
	E-mail address: (to be u	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
Sam Martin		239 at (245-4748	
Name of	Contact Person	Area Co	ode & 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)	
Maili	ng Address	Street	Address	
	dment Section		Iment Section	
Divisi	on of Corporations	Division of Corporations		
	Box 6327		Building	
Tallah	assec, FL 32314	2661 E	Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

•		acorporation of	
TOP OPS, INC.			
(Name	of Corporation as curren	tly filed with the Florida Dept	of State)
P18000001095			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 ts Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation ac	lopts the following amendment(s)
A. If amending name, enter the new n	ame of the corporation:		
N/A			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corpora	orated" or the abbreviation ation name must contain the
• •		4110 Center Point Drive	
B. <u>Enter new principal office address,</u> Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	Suite 216	
		Fort Myers, FL 33916	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		4110 Center Point Drive	
<u></u>		Suite 216	
		Fort Myers, FL 33916	
D. If amending the registered agent an new registered agent and/or the ne	w registered office addre		ne of the
Name of New Registered Agent	N/A		<u> </u>
	(Florida s	street address)	. <u></u>
N - D	4110 Center Point Drive, Suite 216, Fort Myers 33916		33916 . Florida
New Registered Office Address:	(City)		(Zip Code)
New Registered Agent's Signature, if of the leading to the leading to the second the second the second the leading to the lead	hanging Registered Aget tered agent. I am familia	nt: r with and accept the obligation	s of the position.
,	3 ,		SCCR
	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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VPD	Patrick E. Newton	4770 SW 27th Street
Add X Remove			West Park, FL 33023
2) Change	TD	Phyllis Madanian	10336 Materita Drive
Add			Fort Myers, FL 33913
X Remove 3) X Change	PD	Sam Martin	4110 Center Point Drive
Add			Fort Myers, FL 33916
Remove	VPD	Lisa Tomasulo	2104 West First Street
4) Change			
Add Remove			Fort Myers, FL 33901
5) Change		- -	
Add			
6) Change			
Add			
Remove			

	If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
					_
	- · · · · · · · · · · · · · · · · · · ·				
		·			
					
_					
			.		.
	A				
				<u> </u>	
					<u> </u>
					
	<u></u>				
	-			····	
	·		<u>.</u>	· <u>-</u>	
lf an amandmant n	ravidae for an avel	hange reclassificat	ion, or cancellation	of issued shares.	
i an amenement p	lementing the ame	endment if not cont	ained in the amend	ment itself:	
provisions for imp	ble, indicate N/A)				
(if not applicate					
provisions for imp (if not applicat					
provisions for imp (if not applicat	·				
provisions for imp				···-	
provisions for imp					
provisions for imp				47	
provisions for imp				an r	
provisions for imp					
provisions for imp					
provisions for imp					
provisions for imp					
provisions for imp					
provisions for imp					

date this document was signed.	
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
☐ The amendment(s) was/were a must be separately provided f	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
■ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
July 24 Dated Signature	Lew Martin
(By a selec	director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Sam Martin
	(Typed or printed name of person signing)
	PD
	(Title of person signing)

• • •