

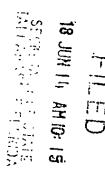
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2018
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	THE ROBERT D'	AMELIO CORPORATIO	N III	
DOCUMENT NUMBER: P180	000001662			
The enclosed Articles of Amenda		bmitted for filing.		
Please return all correspondence	concerning this ma	tter to the following:		
Marie D'A	melio			
		Name of Contact Person	1	
THE ROB	THE ROBERT D'AMELIO CORPORATION III			
		Firm/ Company		
10148 W.	10148 W. INDIANTOWN ROAD			
		Address		
JUPITER	FL 33478			
		City/ State and Zip Cod	<u>e</u>	
CRAFTITFL@(SMAIL.COM			
E-mai	l address: (to be us	sed for future annual report	notification)	
For further information concerning	g this matter, pleas	se call: at (249-6728	
Name of Contact	Person	at (Area Co	de & Daytime Telephone Number	
Enclosed is a check for the follow			•	
	.75 Filing Fee & ifficate 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 Addre Amendment Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301	

Articles of Amendment Articles of Incorporation of

FILED

18 JUN 14 AM 10: 19

THE ROBERT D'AMELIO CORPORATION III	SETHERAPY OF STATE TAREARAS OF FUNRIDA
(Name of Corporation	as currently filed with the Florida Dept. of State)
P18000001662	
(Document	t Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida St its Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	oration:
NONE	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
· ·	NONE
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NONE
	
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi	
NONE	
Name of New Registered Agent	
	(Florida street address)
No. 9 alamator at the second	
New Registered Office Address:	(City) Florida (Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I at	ered Agent: m familiar with and accept the obligations of the position.
	y y pownow.
-	of New Project of the section of the
Signatui	rc 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)

Example:

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 = Trustce; 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.

X Change	<u>PT</u> <u>Jol</u>	John Doe			
X Remove	<u>V</u> <u>Mi</u>	Mike Jones			
X Add	<u>\$V</u> <u>Şa</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) Change	PRES	Robert D'Amelio Sr.	3030 N. Rocky Point Drive		
Add			Suite 150A		
X Remove			Tampa,FL 33607		
2) Change	Pres	Marie A D'Amelio	3030 N. Rocky Point Drive		
X Add			Suite 150A		
Remove			Tampa,FL 33607		
3) Change					
Add					
Remove					
					
4) Change					
Add					
Remove			<u> </u>		
5) Change					
Add		 			
Remove					
Remove					
6) Change					
Add			<u> </u>		
Remove					

(Attach a	ding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
NONE	
	
•	
·	
	
F. <u>If an an</u>	nendment provides for an exchange, reclassification, or cancellation of issued shares,
<u>provisi</u> Ge	ons for implementing the amendment if not contained in the amendment itself: not applicable, indicate N/A)
NONE	not applicable, makate to A j
 .	

	June 12,2018	
The date of each amendment(s date this document was signed.) adoption:	, if other than the
Effective date <u>if applicable</u> : _		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	r
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
June 1: Dated Signature	Labert Carulo Sa	
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court of inted fiduciary by that fiduciary)	
	Robert D'Amelio SR.	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	