

(Re	equestor's Name)	
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(Ac	ldress)	<u> </u>
(Ac	ldress)	
	ty/State/Zip/Phone #j	
(Ci	ty/State/Zip/Prione #,)
PICK-UP	WAIT	MAIL
(Bı	isiness Entity Name)	
(Dr	ocument Number)	
(,	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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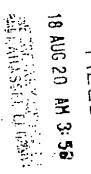
Office Use Only

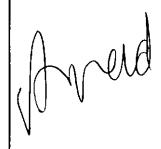


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COVER LETTER

TO: Amendment Section

Division of Corporations					
NAME OF CORPORATION: J2 SQUALPD, INC					
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
JOEL Citter Name of Contact Person J2 Squated, Inc. Firm/Company 8017 13 th Aur. South					
Name of Contact Person					
St Squaled, LAC.					
SO17 13 th AUD South					
Address					
57. Refers bush, 44. 33707 City/ State and Zip Code					
City/ State and Zip Code					
JOEL CUTTER 15@ GHail 10M 1					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
JOEL Cutter at 402, 474-9066					
Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee					
Mailing Address Street Address					
Amendment Section Amendment Section					
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building					

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

Ja Squared Inc.	'
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P 180000 17533	
	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	8017 13th Ave. South 51. Petersburgh
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Florida, 33707 8017 13th Aire South ST. Reteis Buigh,
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent	NA
(Florida st New Registered Office Address:	rect address) 20 Fig. Florida Fig. 1
	(City) (Zip Code) 4
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
	NA
Signature of New i	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	\underline{V}	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	D	Zitting, Joshua P.	8017 13th AUD. S
X Add			51. Petershirsh Fla. 33707
Remove			[9a. 3310]
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		-	
Add			
Remove			
5) Change			
Add			
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6) Change			
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n amendment provides for an o	vchange, rec	lassification.	or cancellatio	n of issued s	hares,	
ovisions for implementing the a (if not applicable, indicate N/A	<u>imendment it</u>)	not contain	ed in the amen	dment itself:	<u>:</u>	
-						
				 		
				<u> </u>		-
				}		
			<u> </u>	<i>)</i> 		
			\ 			

The date of each amendment(s) adoption:	if other than the
late this document was signed.	, it office that the
Effective date if applicable: 8/16//8	
ino more than 90 days after o	amendment file date)
Note: If the date inserted in this block does not meet the applicable statutor document's effective date on the Department of State's records.	y 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 number of v by the shareholders was/were sufficient for approval.	rotes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting g must be separately provided for each voting group entitled to vote separate	
"The number of votes cast for the amendment(s) was/were sufficient for	or approval
hy	:"
hy	
☐ The amendment(s) was/were adopted by the board of directors without share action was not required.	eholder action and shareholder
The amendment(s) was/were adopted by the incorporators without sharehold action was not required.	der action and shareholder
Dated	Q_{ij}
Signature /w (ttlu	· , 171(.
(By a director, president or other officer – if directors selected, by an incorporator – if in the hands of a r	
appointed fiduciary by that fiduciary)	eceiver, trustee, or other court
JOEL COTTOR (Typed or printed name of person)	
(Typed or printed name of perso	on signing)
Procedent	

(Title of person signing)