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S. TALLENT MAR 2 7 2018

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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	rion: <u>Seliv</u>	CR MY ACS	service, Inc
DOCUMENT NUMBE	R: P180	0000230100	
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ndence concerning this ma	tter to the following:	
	<b>N</b>	Name of Contact Person  My IAC SCRUIC  Firm/ Company  St CUMIAL  Address  JO FL 32820  City/ State and Zip Cod	er, Suite C
E-mail address: (to be used for future annual report notification)			
For further information co	oncerning this matter, pleas	se call:	
JONGH TO Name of C	Contact Person	at (4()) Area Co	285 · 1288 de & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:			
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing	Address	Street	Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

#### **Articles of Amendment**

## to

Articles of Inco	rporation	
	wice. Inc.	
(Name of Corporation as currently		2)
P180000 23040		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fit its Articles of Incorporation:	lorida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new name of the corporation:		
NIV		The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation nam	r the abbreviation ne must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NIA	verble to the the same and the
		A CONTRACTOR OF THE CONTRACTOR
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA	AR 26 PH
		Section of
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address;	ss in Florida, enter the name of the	·
NI	1/4	
Name of New Registered Agent		<del></del>
(Florida stree	t address)	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
New Registered Office Address:	Florida_	
· (C	lity)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with	th and accept the obligations of the po	osition.
17/7-	+	· · · · · · · · · · · · · · · · · · ·
Signature of New Reg	gistered 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 <math>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:		T. I. D.	
X Change	<u>PT</u>	<u>John Doe</u>	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u>\</u>	Mike TURG	
Add Remove			Ollando FL 32826
2) Change		NA	
Add			
Remove		_	
3) Change		NIA	
Add			
Remove			
4) Change		NIM	
Add			•
Remove		1	
5) Change			
Add			
Remove			
6) Change			-
Add			
Remove		\	

waxa udumonai sneets, ij necessa	Articles, enter change(s) here: ary). (Be specific)
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	10117
***************************************	<del></del>
<del></del>	<del>-</del>
· · · · · · · · · · · · · · · · · · ·	
an amendment provides for an my isions for implementing the	exchange, reclassification, or cancellation of issued shares, amendment if not contained in the amendment itself:
(if not applicable, indicate N/A	(A)
•	
	NA
	NA
	NIA

The date of each amendment(s) adoption: date this document was signed.	NIT	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this block does no document's effective date on the Department of S		nents, this date will not be listed as the
Adoption of Amendment(s) (CHI	ECK ONE)	
☐ The amendment(s) was/were adopted by the sby the shareholders was/were sufficient for a		amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting :	shareholders through voting groups. The follow group entitled to vote separately on the amenda	
"The number of votes cast for the amen	dment(s) was/were sufficient for approval	
by	W "	
(voti	ng group)	
☐ The amendment(s) was/were adopted by the baction was not required.	poard of directors without shareholder action an	d shareholder
☐ The amendment(s) was/were adopted by the inaction was not required.	ncorporators without shareholder action and sha	areholder
Dated 3/211	18	
Signature		
(By a director, president)	dent or other officer - if directors or officers ha	ve not been
appointed fiduciary	rporator – if in the hands of a receiver, trustee, of that fiduciary)	or other court
	Jonattan Robics	
<u> </u>	Typed or printed name of person signing)	
,	The state of baroon arbund)	
	President	
	(Title of person signing)	