## P18000031143

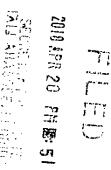
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Amend/cc

APR 2 4 2018

I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: FULL THROTTLE CNC, INC.						
DOCUMENT NUMBER: FTC001	P1	8000031143				
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
JASON MEYERS	JASON MEYERS					
	Name of Contact Person					
FULL THROTTLE CNC, II	FULL THROTTLE CNC, INC.					
	Firm/ Company					
3550 WORK DRIVE, UNIT	3550 WORK DRIVE, UNIT A-2					
	Address					
FORT MYERS, FL 33916	FORT MYERS, FL 33916					
	City/ State and Zip Cod	e				
EFFENBERKKNIVES@GMAIL.	СОМ	•				
E-mail address: (to be u	sed for future annual report	notification)				
For further information concerning this matter, plea	se call:					
DAVID MEYERS	248 at (	525-1973				
Name of Contact Person		de & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:						
□ \$35 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	Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301					

## Articles of Amendment to Articles of Incorporation of

FULL THROTTLE CNC, INC. (Name of Corporation as currently filed with the Florida Dept. of State) FTC001 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) Florida New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 <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:

X Change	<u>PT</u>	John Doe	
X Remove	<u>y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	<u>P</u>	KATHLEEN JOYCE MEYERS	13621 ADMIRAL COURT
X Add			FORT MYERS, FL
Remove			33912
2) Change	P	JASON MEYERS	47120 HARRY STREET
Add			SHELBY TWP., MI
X Remove			48317
3) Change			
Add			
Remove			<u> </u>
4) Change	<del></del>	_	
Add			
Remove			····
5) Change	<u> </u>		
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary,	
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If an amendment provides for an exprovisions for implementing the ar	xchange, reclassification, or cancellation of issued shares, mendment if not contained in the amendment itself:
If an amendment provides for an exprovisions for implementing the ar (if not applicable, indicate N/A)	mendment if not contained in the amendment itself:
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provisions for implementing the ar (if not applicable, indicate N/A)	mendment if not contained in the amendment itself:

The date of each amendment	APRIL 161H, 2018 i(s) adoption:	, if other than the
date this document was signed		
Tiffestine date if applicables	APRIL 16TH, 2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this da he Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment ere sufficient for approval.	(s)
	re approved by the shareholders through voting groups. The following statem ed for each voting group entitled to vote separately on the amendment(s):	ent
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
	IL 16TH, 2018	
Signature	Jase C. May	
S	By a director, president or other officer — if directors or officers have not been elected, by an incorporator — if in the hands of a receiver, trustee, or other couppointed fiduciary by that fiduciary)	art
	JASON MEYERS	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	