P180000 31837

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700323213107

01/24/19--01027--002 **43.75

2018 JAN 24 P 12:10

JAN 28 .00 T. LEYMENY

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: CLOCKWISE .COM CORP DOCUMENT NUMBER: P18000031837 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: John Myers Name of Contact Person CLOCKWISE.COM CORP Firm/ Company 269 Sunset Dr Address Islamorada Florida 33036 City/ State and Zip Code myersonthebeach@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 393-4469

Area Code & Daytime Telephone Number John Myers Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & **■\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



CLOCKWISE.COM CORP	0010
(Name of Corporation as	s currently filed with the Florida Dept. of State
P18000031837	_ ·
(Document)	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpor	ration:
CLOCK WISE .COM CORP	The new
	corporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the
	N/A
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	<u> </u>
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	N/A
	
D. If amending the registered agent and/or registered of	
new registered agent and/or the new registered office	e address:
Name of New Registered Agent N/A	
()	Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	
	James and weeks the vollagement of the position.
,	
N/A	
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 Do	<u>oe</u>			
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally Sr	n <u>ith</u>			
Type of Action (Check One)	Title		Name	<u>Addres</u> s		
1)Change		-				
Add						
Remove						
2) Change						
Add		_				
Remove						
3) Change						
Add		_				
Remove						
Kellove						
4) Change		_				
Add						
Remove						
6) 69						
5) Change		-				
Add						
Remove						
6) Change		_				
Add						
Remove						

E. If amending or adding additional A (Attach additional sheets, if necessary,		e(s) here:
FROM CLOCKWISE .COM CORP T	O CLOCK WISE	COM CORP
	,	
F. If an amendment provides for an ex provisions for implementing the an (if not applicable, indicate N/A)	change, reclassifica nendment if not co	ntion, or cancellation of issued shares, ntained in the amendment itself:
N/A		
		

The date of each amendment		, if other than the
date this document was signed Effective date if applicable:	1-14-2019	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this dathe Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes east for the amendment(ere sufficient for approval.	s)
	re approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and sharehold	ет
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
1-14- Dated	2019	
Signature	by a director, president or other officer – if directors or officers have not been	
se	by a director, president or other ornicer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other compointed fiduciary by that fiduciary)	rt
	JOHN F. MYERS	
	(Typed or printed name of person signing)	
	PRES. VP. SECT/TREAS	
	(Title of person signing)	