P18000040898

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COVER LETTER

• **TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: HIGH FIVE DIS	SCOUNTS INC					
DOCUMENT NUMBER: P18000040898						
The enclosed Articles of Amendment and fee are	submitted for filing.					
Please return all correspondence concerning this matter to the following:						
ROBERT TALYANSKY						
	Name of Contact Person	1				
HILINE SPORT INC						
	Direct Commons					
Firm/ Company						
	4814 SW 28TH STREET					
T	Address					
DANIA, FL 33312						
	City/ State and Zip Code	e				
RGRICHENER@GMAIL.COM						
E-mail address: (to be	used for future annual report	notification)				
For further information concerning this matter, please call:						
ROMAN GRICHENER	at (718-5048				
Name of Contact Person		de & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:						
S35 Filing Fee & Certificate of Status		□\$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	Amend Divisio Clifton	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

HIGH FIVE DISCOUNTS INC		,,
(Name of Corporation as curren	itly filed with the Florida Dept. of Si	<u>tate</u>)
P18000040898		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts t	he following amendment(s) to
A. If amending name, enter the new name of the corporation:		
HI LINE SPORT INC		The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation in "P.A."	" or the abbreviation name must contain the
B. Enter new principal office address, if applicable:	4814 SW 28TH STREET	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	DANIA, FL 33312	ب
		THE T
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4814 SW 28TH STREET	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	DANIA, FL 33312	三三〇
		٠. ٠.
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		the
Name of New Registered Agent		
(Florida :	street address)	
New Registered Office Address:	, Flori	da
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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

(Attach additional sheets, if necessary)

. address of each Officer and/or Director being added:

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>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
l) Change		_		
Add				
Remove				
2) Change				
Add		_		
Remove				
3) Change				
Add				
Remove				
4) Change				
4) Change				
Remove				
Kemore				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

. E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.	·	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this repartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment ufficient for approval.	nt(s)
	oproved by the shareholders through voting groups. The following state reach voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
☐ The amendment(s) was/were action was not required.	lopted by the board of directors without shareholder action and shareho	lder
☐ The amendment(s) was/were action was not required.	lopted by the incorporators without shareholder action and shareholder	
12/05/201		
DatedSignature		
(By a select	director, president or other officer – if directors or officers have not beed, by an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	en ourt
	ROBERT TALYANSKY	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	