P18000041798

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2020 AFR 28 AHII: 02

Amend

MAY 13 2020 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: ROCKBOTTOM	SPECIALTIES, INC	
DOCUMENT NUMBE	P18000041798		
The enclosed Articles of	"Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	itter to the following:	
J.	AMES R FEASTER		
-		Name of Contact Person	<u> </u>
R	OCKBOTTOM SPECIAL	TIES, INC	
		Firm/ Company	
2	2200 NW 117 COURT		
_		Address	······································
٨	IICANOPY, FL 32667		
_		City/ State and Zip Cod	e
b	eaufeaster@yahoo.com		
		sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
JAMES R FEASTER		352	2347143
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 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		Amenc Divisie	Address Iment Section on of Corporations
P.O. Box 6327 Tallahassec, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

DOOLOGTTON ODEOW TIES	INIC

 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

ROCKBOTTOW SPECIALTIES, INC.	
	ntly filed with the Florida Dept. of State)
P18000041798	- 33
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, th its Articles of Incorporation:	nis Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.,	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	1020
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	70 T
Graning dates MAT BE ATOM OFFICE BOX	
	- 11: 02
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addre	udress in Fioriua, enter the name of the
Name of New Registered Agent	
tFlorida -	street (aldress)
New Registered Office Address:	. Florida
	(City) (Zip Code)
Name David and Advanced Advanced in the Control of the David and Advanced Advanced in the Control of the Contro	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	
Signature of Vere	r Registered Agent, if changing
	regarded agent, y endiging
Check if applicable	

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:

 $P \sim President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer director holds more than one title, list the first letter of each office held President, Treasurer, Director would be PTD.$

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 Jol</u>	<u>ın Doc</u>	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
<u>X</u> Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change	VP	JACOB FEASTER	2137 WEST HORIZON DR
X Add			HEBRON, KY 41048
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) ('hange			
Add			
Remove			
6) Change			
Add			
Remove			<u> </u>

Attach additional sheets, if necessary).	(Be specific)
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If an amendment provides for an each	ange, reclassification, or cancellation of issued shares.
If an amendment provides for an each	ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
If an amendment provides for an each; provisions for implementing the amer (if not applicable, indicate N.4)	ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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If an amendment provides for an exchaprovisions for implementing the amer (if not applicable, indicate N A)	ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

. . . .

The date of each amendment(s) add	ption:	, if other than th
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 blo document's effective date on the Dep	ck does not meet the applicable statutory filing requirements artment of State's records.	, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adoptaction was not required.	ted by the incorporators, or board of directors without shareho	lder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes east for the ame icient for approval.	ndment(s)
	oved by the shareholders through voting groups. The following ach voting group entitled to vote separately on the amendment	
"The number of votes east fo	or the amendment(s) was/were sufficient for approval	
by	."	
•	(voting group)	
Signature Ja	us & Deast	
(Vy a dir selected.	petor, president or other officer — if directors or officers have n by an incorporator — if in the hands of a receiver, trustee, or of d fiduciary by that fiduciary)	
J	AMES R FEASTER	
_	(Typed or printed name of person signing)	
F	RESIDENT	
_	(Title of person signing)	