## P18000047439

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AUG 0 3 2019

J WICHAIK

COVER LETTER	•
TO: Amendment Section Division of Corporations NAME OF CORPORATION BUILTON PUVOLITIA TARE, SELUICE	
NAME OF CORPORATION BUTTON AVALITY TREE DETUICE DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Burton Quality The Service	
3301 Coe Ave Address ORLando FL 32806 Chv/ State and Zip Code	
E-mail address: (to be used for Tuture annual report notification)	
For further information concerning this matter, please call: STEVE BURTON 407 - 860 - 6553 DOMAC BROCKS at (407) 898 - 6674 Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State: (\$35 Filing Fee) S43.75 Filing Fee & S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301	

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•	Articles of Amendment to	ALLECTARY OF STATE
	Articles of Incorporation	
$\cdot$ $\widehat{D}$	Quil of C	2818 AUG 2 8 PH 14 28
BULTON	(Vuality Rec. Deri	Vice
	(Name of Corporation as currently filed with the Florida D	ept. of State)
	P18000047439	
	(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:

N	The ne
name must be distinguishable and contain the word "corporation/ "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain th
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u> )	N/A
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BON</u> )	<i>I</i> :/H
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
Name of New Registered Agent////	<u>A</u>
(Florida stree <u>New Registered Office Address</u> :	i address) , Florida Jityj (Zin Code)

<u>New Registered Agent's Signature, if changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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III/IZ 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:

<u>X</u> Change	<u>PT</u> John Doe
X Remove	<u>V</u> <u>Mike Jones</u>
<u>X</u> Add	SV Sally Smith
<u>Type of Action</u> (Check One)	<u>Title</u> <u>Name</u> <u>Address</u>
1) Change	BD Steve R Burton 6821 Pompeii Rd Oplando, FC
Add Remove	Oplando, FC
Keniove	
2) Change	
Add	
Remove	
3) Change	
Add	
Remove	,
4) Chunge	
Add	
Remove	
5) Change	
Add	<del>_</del>
Remove	
6) Change	
Add	
Remove	

	ets, if necessary). (Be	specific)		
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F If an amendment pro	vides for an exchange	, reclassification, or cance	lation of issued charos	
provisions for imple	menting the amendme	nt if not contained in the	amendment itself:	2
(if not applicable	, indicate N/A)			
		$\lambda 1 1 1$		
· · · · · · · · · · · · · · · · · · ·				
		<u> </u>		

Page 3 of 4

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Effective date <u>if applicable</u> :	10/12		
<u> </u>	(no more than 90 days o	after amendment file date)	
<b>Note:</b> If the date inserted in this bl document's effective date on the Dep		atutory tiling requirements, this da	te will not be listed
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
The amendment(s) was/were adop by the shareholders was/were sull		r of votes cast for the amendment(s	5)
□ The amendment(s) was/were appr must be separately provided for a	oved by the shareholders through vo each voting group entitled to vote sep		int
"The number of votes cast f	or the amendment(s) was/were suffic	ient for approval	
by	(voting group)	· · ·	
	(voting group)		
action was not required. The amendment(s) was/were adopted action was not required.	nted by the incorporators without sha	reholder action and shareholder	
	<u>8-16-18</u>	1	
Dated	11the AS. I		
Signature	rector, president or other officer - if a	directors or officers have not been	
Signature (by a di selected	Fector, president or other officer – if $d$ by an incorporator – if in the hands		
Signature (by a di selected			t
Signature (by a di selected	by an incorporator – if in the hands of fiduciary by that fiduciary) STPDP - BL	of a receiver, trustee, or other cour $\frac{1}{2}$	t
Signature (by a di selected	, by an incorporator - if in the hands	of a receiver, trustee, or other cour $\frac{1}{2} + \frac{1}{2} + \frac{1}{2$	
Signature (by a di selected	by an incorporator – if in the hands of fiduciary by that fiduciary) STPDP - BL	of a receiver, trustee, or other cour $\frac{1}{2}$	1

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