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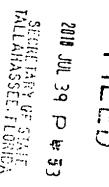
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AUG 0 3 2013

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	TION:	HE BARKMORE RESOF	RT, INC.
DOCUMENT NUMBEI	P180	00061678	
The enclosed Articles of A	A <i>mendment</i> and fee are sub	omitted for filing.	
Please return all correspo	ndence concerning this mat	ter to the following:	
	Wa	alter E. Smith, Registered .	Agent
_		Name of Contact Person	1
· —		Firm/ Company	
•	•	757 Arlington Avenue No	rth
		Address	
		St. Petersburg, FL 3370	1
_		City/ State and Zip Cod	e
	•	anie@superdogeenter.con	
	E-mail address: (to be use	ed for future annual report	notification)
For further information co	oncerning this matter, please	e call:	
Stepha	nie Carver	216 at (de & Daytime Telephone Number
Name of C	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for th	e following amount made p	ayable to the Florida Depa	artment of State;
S35 Filing Fee	□\$43.75 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		Ameno Divisio	Address Iment Section on of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

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The Barkmore Res	sort, Inc.
(<u>Name of Corporation as curren</u> P18000	tly filed with the Florida Dept. of State)
	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation: N/A	
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
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 adenew registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent—I am familian	
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.

X Change	<u>PT</u> <u>Jo</u>	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	dly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	P	Stephanie Carver	10125 Land O Lakes Boulevard
Add			Land O Lakes, FL 34638
Remove			
2) Change			
Add			-
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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f an ame	<u>ndment prov</u>	<u>ides for an ev</u>	vchange, recla:	<u>ssification, or c</u>	ancellation of	issued shares,	
provision	<u>ns for implen</u>	nenting the ar	<u>mendment if n</u>	<u>ot contained in</u>	the amendme	nt itself:	
	от аррисавие,	indicate N/A)					
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date <u>if applicable</u> :	io more than 90 days after amendment file date)
(1	10 more than 90 days after amendment file date)
Note: If the date inserted in this block does not a document's effective date on the Department of Sta	meet the applicable statutory filing requirements, this date will not be listed as the te's records.
Adoption of Amendment(s) (CHEC	CK ONE)
☐ The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for appr	reholders. The number of votes cast for the amendment(s) royal.
☐ The amendment(s) was/were approved by the sh must be separately provided for each voting gra	nareholders through voting groups. The following statement oup entitled to vote separately on the amendment(s):
"The number of votes east for the amendu	nent(s) was/were sufficient for approval
by(voting	
(voting	group)
The amendment(s) was/were adopted by the boa action was not required.	ard of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the incaction was not required.	orporators without shareholder action and shareholder
7/20/18	
Dated 7 30 / 8	
Signature	nt or other officer – if directors or officers have not been
	prator – if in the hands of a receiver, trustee, or other court
	Stephanie Carver
(Ty	ped or printed name of person signing)
	President
	(Title of person signing)