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(Re	questor's Name)	_
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PICK-UP	☐ WAIT	MAIL
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Office Use Only



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2018 AUG 29 AM II:35 SECRETARY OF STATE

C. GOLDEN

AUG 3 1. 2018

## **COVER LETTER**

**TO:** Amendment Section

**Division of Corporations** NAME OF CORPORATION: SANCTUARY 1425 INC DOCUMENT NUMBER: <u>\$180000724</u> The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: SE MElow Address DKRESKY8 @ AOL. coin

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$**43.75 Filing Fee & □\$52.50 Filing Fee **□\$43.75** 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

> 2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

	Articles of Amendmen	ز	PARAUG 29 AM
	to Articles of Incorporation	on Š	18 Allo
,	of	Sec. 3.62	ું જેટ્યું ,
SANCHARY	TEES F	$\omega \subset \mathcal{A}$	Cala 44
(Name of Corpo	ration as currently filed wi	th the Florida Dept. of State)	17/25 OF
P 180000 72435	EIN 9	67-167513	UA 4. 4
	ocument Number of Corporat	ion (if known)	
Pursuant to the provisions of section 607.1006, Fl its Articles of Incorporation:	orida Statutes, this <i>Florida P</i>	rofit Corporation adopts the fo	ollowing amenda
A. If amending name, enter the new name of the	ne corporation:		
			The ne
name must be distinguishable and contain the "Corp" "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	Corp," "Inc," or "Co". A partie the abbreviation "P.A."	professional corporation name	must contain ti
B. Enter new principal office address, if applic		WIEL KRESKI	`
(Principal office address <u>MUST BE A STREET</u>	ADDRE (S)	2413SE M	14/c.v C+
	_	Port St. Luci's	F1 34
		18121 01 0001	
C. Enter new mailing address, if applicable:	- BOW		
(Mailing address <u>MAY BE A POST OFFICE</u>	<u></u>	<u> </u>	
	<del></del>		
			·
D. If amending the registered agent and/or reg	internal affice address in Flo	wide outer the name of the	
new registered agent and/or the new register		rida, enter the name of the	
Name of New Registered Agent			
Nume of New Registered Agent			
	(Florida street address		<del></del>
New Registered Office Address:	(City)	, Florida	(Zip Code)
	• •		•
New Registered Agent's Signature, if changing		and the all the state of the	
, ,	ent. I am tamiliar with and a	ccept the obligations of the po:	siiion.
I hereby accept the appointment as registered age	<i>j</i> =		

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 Doc	
X Remove	<u>y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)  1) Change Add Remove	Title	Name DANIEL KRESKY	Address  2413 SEMELON ( PORT ST LUCIE F  34952
2) Change Add Remove			
3 ) Change Add Remove			
4) Change Add Remove			
5) Change Add			
Change Add Remove			

Attach addi.	g or adding additional A itional sheets, if necessar	y). (Be specific)	ALLEY WALLE.		
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provisions	dment provides for an e s for implementing the a applicable, indicate N/A	mendment if not co	eation, or cancellationtained in the ame	ion of issued shares. ndment itself:	
	·				
				•	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	<del></del>
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	Il not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 27 AUG 2018 Signature 10018	
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
DAHIEL KRESKY	
(Typed or printed name of person signing)	
MESDEHT	
(Title of person signing)	