## P 19000053666

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NEW SELECTION

Chickbrie

## COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Davis & Brothers, inc DOCUMENT NUMBER: \_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Mandrick Davis
Name of Contact Person Firm/ Company 1930 South monion st Talkhosse Florida 32316
City/ State and Zip Code For further information concerning this matter, please call: at (<u>850</u>) <u>321-6439</u> Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: ☑ \$35 Filing Fee □\$52.50 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Articles of the	ni por ation
of	
Devis & Brothers	inc
(Name of Corporation as currently	v filed with the Florida Dept. of State)
	The state of the s
(i)ocument Number of	Corporation (if known)
ursuant to the provisions of section 607,1006. Florida Statutes, this as Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
. If amending name, enter the new name of the corporation:	
ame must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or " ord "chartered," "professional association," or the abbreviation "	Co". A professional corporation name must contain the
Enter new principal office address, if applicable:	1930 South margae st
Principal office address MUST BE A STREET ADDRESS )	1930 South monice st Tallalussee F/ 3230/
	- 101/00 BEE - 1-1 - 3 ESU/
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 2842 Jell, Fl, 32316
(Stutting undress SINT DE ATTOST OFFICE DOLO	<u></u>
. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office address	<u>ii</u>
Name of New Registered Agent	
(Elmide et	rvet address)
(runua sir	eer duaress)
New Registered Office Address:	, Florida
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registered Agent	1.
hereby accept the appointment as registered agent. I am familiar	wun ana accept the obtigations of the position.
	De la
Signature of New I	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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u> <u>John</u>	ı Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
<u>X</u> Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
i) Change	<del>\tilde{\</del>	Brian Mc Queen	915 27 rn cur
_X_ Add			Furbanks Alaska
Remove			49701
2) Change			
Add			-1
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<del></del>		
Add			
Remove			
6) Chana			
6) Change			
Add			
Remove			

attach additional sheets, if necessary).	(Be specific)		
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	<u>.                                    </u>		
		+	
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		<del>-</del>	
f an amendment provides for an exc	hange, reclassification, or	cancellation of issued share	res,
	engment ii not contained u	i the amendment itsen:	
provisions for implementing the ame (if not applicable, indicate N/A)			
provisions for implementing the amount (if not applicable, indicate N/A)			
provisions for implementing the am (if not applicable, indicate N/A)		<u> </u>	~
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provisions for implementing the am (if not applicable, indicate N/A)			
provisions for implementing the am (if not applicable, indicate N/A)			

The date of each amendment(s) adoption:	, if other than the
Effective date <u>if applicable</u> :  (no more than 90 days after amendment file date)	
(no more than 90 days after amenament file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will 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	
☐ 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 <b>/D</b> - 8 - 14	
Signature  (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 tiduciary by that fiduciary)	
(Typed or printed name of person signing)	
CEO (Title of person signing)	
(Title of person signing)	