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COVER LETTER

. ...

NAME OF CORPORATION: SROUD 35 IN C. 6003367001 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: STACLY PI+ ILLPS
Name of Contact Person Firm/Company,
Y7; S/W S-NDANCETRAIL
Address Pr Sr. 2 uciz, FL.
City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: STACI - PHILLIPS at 1 95 1) 803 - 05 85

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

> Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

Division of Corporations

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Fallahassee, FL 32301

Articles of Amendment ŧo

Articles of Incorporation of

GROUP 35 (Name of Corpor	tion as currently fi	iled with the Florida	Dent. of State)	
(<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			in party	
(Doc	ument Number of C	orporation (if known)		
Pursuant to the provisions of section 607,1006, Flor its Articles of Incorporation.	ida Statutes, this Fla	orida Profit Corporatio	on adopts the following	, amendment(s) t
A. If amending name, enter the new name of the	corporation:			
name must be distinguishable and contain the w	s C.			The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co- word "chartered." "professional association," or to	rp," "Inc," or "Co	". A professional cor	corporated" or the ab rporation name must c	breviation ontain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		S Am c		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	8 <i>0X</i>)	5 A W	n C	
D. If amending the registered agent and/or regis new registered agent and/or the new register		in Florida, enter the	name of the	
Name of New Registered Agent	SATTI	L		
	(Florida street	address)		
New Registered Office Address:	SAN	1 4	Florida	
	ţСı	fvj	Пір С	ode)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		and accept the obliga	itions of the position.	
	NIA			
Si	gnature of New Regi	stered Agent, if chang	ing	

FILED

19 NOV 14 ANTH 35

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)

____ Remove

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: John Doe X Change <u>PT</u> X Remove <u>v</u> Mike Jones \underline{X} Add <u> 5Y</u> Sally Smith Type of Action <u>Addres</u>s Title Name (Check One) 11 ____ Change ____ Add ___ Remove 2) ____ Change ____ Add ____ Remove 3.) ____ Change ____ Add ____ Remove 4) ____ Change ___ Add ____ Remove 5) ____ Change ____ Add __ Remove 6) ____ Change ____ Add



Page 2 of 4

Page 3 of 4

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption:	11 9	19 '	, if other than th
date this document was signed.			
Effective date if applicable:	11/9/1	7 lays after amendment file dat	
	(no more than 90 a	lays after amendment file dat	te)
Note: If the date inserted in this block does r document's effective date on the Department of		le statutory filing requireme	nts, this date will not be listed as the
Adoption of Amendment(s) (CF	IECK ONE)		
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The nu approval.	umber of votes east for the ar	nendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting			
"The number of votes east for the ame	ndment(s) was/were s	ufficient for approval	
by			
(vo.	ting group)		
☐ The amendment(s) was were adopted by the action was not required.	board of directors wi	thout shareholder action and	shareholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators withou	t shareholder action and shar	cholder
Dated/	9	(T) 0-1	
Signature		Xy)	
(By a director, pres		- if difectors or officers hav	
selected, by an ince appointed fiduciary		ands of a receiver, trustee, or	other court
·	•	0 10	
	>TARECTY	me of person signing)	
	(Typed or printed nar	ne of person signing)	
	$P_{\mathcal{R}_{i}}$	2 S (D KNT person signing)	
	(Title of p	person signing)	

19 NOV 14 AH 11: 35

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