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(Document Number)	_
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10/08/12-01036-007 **43.75

Anund 015 10/9/12

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	on:	and O Lakes Gun &	Pawn, NC.		
	P94000026796				
DOCUMENT NUMBER: _					
The enclosed Articles of Am	endment and fee are su	ibmitted for filing.			
Please return all corresponde	nce concerning this ma	atter to the following:			
		Bill Parsons			
	Name of Contact Person				
	Jory	n jenkins & Associate	es		
	64	Firm/ Company			
		18 Angus Valley Dr			
	We	Address sley Chapel Florida 3	33544		
		City/ State and Zip Code	e		
	bi	ill@jorynjenkinslaw.c	om		
	E-mail address: (to be u	sed for future annual report	notification)		
r		11.			
For further information conc	erning this matter, plea	se can:			
Bill Parsons		813 at (690-0721		
Name of Con	tact Person		de & Daytime Telephone Number		
Enclosed is a check for the f	ollowing amount made	payable to the Florida Depa	artment of State:		
□ \$35 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 A			Address		
Amendme Division o	nt Section f Corporations		Iment Section on Corporations		
P.O. Box	-		Building		
Tallahasse	e Fl. 32314	2661 F	Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of . INC

Pursuant to the provisions	of section 607.1006, F	lorida Statutes, this Fa	lorida Profit Corpora	tion adopts the following	g amendment(s) to

	P94000026796		
(Document Number	of Corporation (if known)	-	
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	ida Statutes, this <i>Florida Pro</i>	ofit Corporation adopts the follow	ing amendment(s) t
A. If amending name, enter the new name of the	corporation:		
			The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or the B. Enter new principal office address, if applicate (Principal office address MUST BE A STREET AL	rp," "Inc," or "Co". A pr ne abbreviation "P.A." ple:		
Trincipal office address MOST BEATSTREET AL			
	-	· · · · · · · · · · · · · · · · · · ·	- 西 巍
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	POV)		00
(mailing dudress MAT BL A FOST OFFICE D	<u></u>		0
D. If amending the registered agent and/or registered agent and/or the new registered		rida, enter the name of the	
	tu office address.		
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		. Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing R	egistered Agent:		

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: X Change	PT Joh	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PTD	Wydra,Walter L	3541 E. Lake Dr
Add .			Lank O Lakes Fl 34639
X Remove			
2) Change	VSPD	Depolis,Gabrielle F	3541 E. Lake Dr
∆.dd			Land O Lakes FI 34639
X Remove			
3) Change	PCEO	Laskowsky,John P	23202 Emerson Way
Add			Land O lakes FI 34639
Remove			
4) Change	VPSD	Laskowsky, Rhonda Lea	23202 Emerson Way
4) Change X Add			Land O Lakes FI 34639
Remove	,		·
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	i sheets, if necessary,). (Be specific)			If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)				
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The date of each amendment(s) adoption: _	10-8-2012
Effective date if applicable:	10-8-2012
<u></u>	(no more than 90 days after amendment file date)
· ·	
Adoption of Amendment(s)	CHECK ONE)
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	ne shareholders. The number of votes cast for the amendment(s) r approval.
	the shareholders through voting groups. The following statement ng group entitled to vote separately on the amendment(s):
"The number of votes cast for the am	nendment(s) was/were sufficient for approval
by	25
(v	voting group)
☐ The amendment(s) was/were adopted by th action was not required.	ne board of directors without shareholder action and shareholder
action was not required	ne incorporators without shareholder action and shareholder
Dated 10 - Z	2012
Signature	Walte Tallade
(By a director, proselected, by an in	esident or other officer if directors or officers have not been acorporator – if in the hands of a receiver, trustee, or other court ary by that fiduciary)
	Walter L Wydra
	(Typed or printed name of person signing)
	PTD
	(Title of person signing)