# P95000010844

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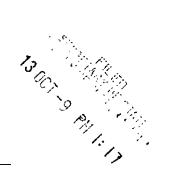
Amand (10.10.13)

#### **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Florida Xotc Inc DOCUMENT NUMBER: P95000010844 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Robert Roe Name of Contact Person Florida Xotic Inc Firm/ Company 3959 Van Dyke Rd #302 Address Lutz FL 33548 City/ State and Zip Code fx@tampabay.rr.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Robert Roe Name of Contact Person 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 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 P.O. Box 6327 Clifton Building Tallahassee, FL 32314 --2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment** Articles of Incorporation of



### (Name of Corporation as currently filed with the Florida Dept. of State)

#### Florida Xotic Inc Doc # P95000010844

dment(s) to

s Articles of Incorporation:			
A. If amending name, enter the new name of the o	corporation:		
			The ne
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corpord" chartered," "professional association," or the	p," "Inc," or "Co". A prof	y," or "incorporated essional corporation	l" or the abbreviatio name must contain th
3. Enter new principal office address, if applicab	<u></u>	<u>.</u>	
Principal office address <u>MUST BE A STREET AD</u>	DRESS )		
•		<del></del> · <del></del>	
		·	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	(X)		
manag and cos man ban to be of the ban be			
			<del></del>
<ol> <li>If amending the registered agent and/or registenew registered agent and/or the new registered.</li> </ol>		a, enter the name of	<u>tne</u>
Name of New Registered Agent		<del>.</del>	
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)		(Zip Code)
	amintowed Aments		
New Registered Agent's Signature, if changing Refereby accept the appointment as registered agent.			L =isi

# 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 <math>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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Pres	William Klein	3810 Little Rd
Add			Lutz, FL 33548
Remove			· · · · · · · · · · · · · · · · · · ·
2) Change	Pres.	Robert Roe	3959 Van Dyke Rd #302
Add			Lutz, FL 33548
Remove			
3) Change			
Add			
Remove			
4) Change	<u></u>		
Add			
Remove			
5) Change			
Add			
Remove			
·			
6) Change	<del></del>	<u> </u>	
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
B 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10	<u> </u>	
<u> </u>		
f an amendment provides for an eych	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame	endment if not contained in the amendment itself:	
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
provisions for implementing the ame	endment if not contained in the amendment itself:	
provisions for implementing the ame	endment if not contained in the amendment itself:	
provisions for implementing the ame	endment if not contained in the amendment itself:	
provisions for implementing the ame	endment if not contained in the amendment itself:	
provisions for implementing the ame	endment if not contained in the amendment itself:	
provisions for implementing the ame	endment if not contained in the amendment itself:	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
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 1/4   13	
Signature All de	
(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)	
Robert Ros	
(Typed or printed name of person signing)	
Precident	
(Title of person signing)	<del></del>