P950000 31924

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R. WHITE FEB 1 8 2020

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: K-O CONCEPTS,	INC.			
DOCUMENT NUM	P95000031924				
The enclosed Articles	of Amendment and fee are sub	omitted for filing.			
Please return all corre	spondence concerning this mat	ter to the following:			
	Mindy L. Ritz-Owen				
		Name of Contact Person	1		
	K-O Concepts, Inc.				
	<u> </u>	Firm/ Company			
	4375 SOUTH STREET				
		Address			
	TITUSVILLE, FL 32780				
		City/ State and Zip Code	2		
	mindy.ritz@k-oconcepts.com				
	E-mail address: (to be use	ed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	e call:			
Mindy L. Ritz-Owen		at (_) <u>296-7788</u>		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made p	ayable to the Florida Depa	artiment 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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

Articles of Amendment to Articles of Incorporation of .

K-O Concepts, Inc.			2020 - 122 7.1 9:29	
(<u>Name</u>	of Corporation as currer			
P95000031924				
	(Document Number	of Corporation (if kr	nown)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	s Florida Profit Cor	poration adopts the following a	imendment(s) t
A. If amending name, enter the new n	ame of the corporation:			
N/A			7	he new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cohartered," "professional association,	Corp," "Inc." or "Co".	A professional cor	orporated" or the abbreviation	"Corp., "
B. Enter new principal office address,		N/A		
(Principal office address <u>MUST BE A S</u>	<u>oireet aduress</u>)			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	licable: OFFICE BOX)	N/A		
(* · · · · · · · · · · · · · · · ·	<u> </u>			
D. If amending the registered agent a	nd/ar registered affice ad	dress in Florida an	ter the name of the	
new registered agent and/or the ne			ter the hame of the	
Name of New Registered Agent	N/A			
	(Florida :	street address)		
New Registered Office Address:	N/A		Manida	
New Registered Office Address.		(City)	, Florida /Zip Cod	le)
New Registered Agent's Signature, if c I hereby accept the appointment as regis.			obligations of the position.	
	Signature of New	Registered Agent, if	chanoino	
	inglature of New	педіметса пуст, у	ониндиц	
Check if applicable				

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	Mindy L. Ritz-Owen	4375 SOUTH STREET
X Add			TITUSVILLE, FL 32780
Remove			·
2) Change	S	RUTH E TRAVER	4375 SOUTH STREET
Add			TITUSVILLE, FL 32780
X Remove	T	EDGAR H Traver	4375 SOUTH STREET
Add			TITUSVILLE, FL 32780
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Auach <i>addilional</i>	dding additional All sheets, if necessary)). (Be specific)			
4					
		12			
				<u> </u>	
-			-		
				-	·
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f an amendment	t provides for an ex	change, reclassific	cation, or cancel	ation of issued sh	ares,
if not applie	mplementing the an cable, indicate N/A)	<u>aenament ii not co</u>	ontained in the a	menament itseii:	
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			<u> </u>		
					
<u>,</u>	<u> </u>				
· · · ·					
		<u>. </u>			

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
Entered date in applicable.	(no more than 90 days after amendment	file date)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing rec partment of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors witho	ut shareholder action and shareholder
The amendment(s) was were add by the shareholders was/were su	pted by the shareholders. The number of votes cast f fficient for approval.	or the amendment(s)
	roved by the shareholders through voting groups. The each voting group entitled to vote separately on the a	
"The number of votes cast	for the amendment(s) was were sufficient for approva	ıl
by		
	(voting group)	
Dated	·	
Signature		
selected	rector, president or other officer – if directors or officel, by an incorporator – if in the hands of a receiver, trued fiduciary by that fiduciary)	
	Randel W. Owen	
	(Typed or printed name of person signing)	
	President Randel W. O	wen
	(Title of person signing)	