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SEP 13 2016 R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: HUCKLEBERRY	NOTARY BONDING, INC	C
DOCUMENT NUMBE	R:		
The enclosed Articles of	Amendment and fee are sul	omitted for filing.	
Please return all correspo	ondence concerning this mat	ter to the following:	
			_
		Name of Contact Person	l
F	HUCKLEBERRY NOTARY BONDING, INC.		
		Firm/ Company	
23	25 E Robinson St Ste. 570		
_		Address	
O	rlando, FL 32801		
_		City/ State and Zip Code	
info@fl	oridaincorporationservice.c	om	
	<u>-</u>	sed for future annual report	notification)
	13 man address. (to be ac	ou for future united report	
For further information	concerning this matter, pleas	se call:	
Jeffrey Pairan		at (370-2942
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following 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)
Amen Divis P.O. I	ng Address diment Section fon of Corporations Box 6327 hassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Imment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment Articles of Incorporation of

FILED

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HUCKLEBERRY NOTARY BONDING, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P95000036436 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 225 E Robinson St. Ste 570 B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) Orlando, FL 32801 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE_BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Denise Barton Name of New Registered Agent 225 E Robinson Street Ste. 570 (Florida street address) Florida 32801 Orlando New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. 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.

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>	Name	Address
1) X Change	<u>v</u>	DERRICK HUCKLEBERRY	225 E Robinson Street ste. 570
Add			Orlando, FL 32804
Remove			
2) Change	D	JENNIFER HUCKLEBERRY	600 E COLONIAL DRIVE #200
Add			ORLANDO, FL 32803
X Remove			
3) Change	PD	Jeffrey Pairan	225 E Robinson Street Ste 570
X Add			Orlando, Fl 32801
Remove			
4) Change	S	Ed McMahan	225 E Robinson Street Ste 570
X Add			Orlando, Fl 32801
Remove			
5) Change	T	Joseph Schonberg	225 E Robinson Street Ste 570
X Add			Orlando, Fl 32801
Remove			
6) Change			
Add			
Remove			

amending or adding additional Arti ttach additional sheets, if necessary).	(Be specific)			
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		<u> </u>	·	<u> </u>
f an amendment provides for an exc provisions for implementing the amo	hange, reclassification, or endment if not contained	cancellation of issing the cancellation of issinguity.	ued shares, itself:	
(if not applicable, indicate N/A)				
				

The date of each amendment(s) ad	option:	_, if other than the
date this document was signed.		
	/2016	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ador by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement 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)	
action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
08/26/2016		
Dated		
α		
Signature Signature	<u></u>	
By a A	irector, president or other officer - if directors or officers have not been	
selecte	d, by an incorporator - if in the hands of a receiver, trustee, or other court	
appoint	ted fiduciary by that fiduciary)	
	Jeffrey Pairan	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	