## P95000037060

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None Charle

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3/3/15

## **COVER LETTER**

TO: Amendment Section Division of Corporations HEADWATER NAME OF CORPORATION: \_\_\_ DOCUMENT NUMBER: \_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: NANCY GIVENS
Name of Contact Person Firm/ Company 13720 CYPRESS TERRACE CIR STE 303 FORT MUERS FL 33907
City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: NANCY GIVENS at (239) 466-9900

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: S35 Filing Fee **□\$43.75** Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## Articles of Amendment to Articles of Incorporation

FILED

ou 1.: 46

	of		2015 MAR 27	PM 4-40
HEADWATERS (Name of Corporation as co		da Dept. of State)	TALLAHASSE	OF STATE E. FLORIDA
	0037060 Number of Corporation (if kno	<del></del>	<b>10</b> , 100 .	· ·
Pursuant to the provisions of section 607.10 ts Articles of Incorporation:	06, Florida Statutes, this <i>Flor</i>	rida Profit Corpora	tion adopts the fo	llowing amendment(s)
A. If amending name, enter the new nam	e of the corporation:			
CRACKER JACK  name must be distinguishable und contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	n the word "corporation," ion "Corp," "Inc," or "Co"	"company," or "il '. A professional c	ncorporated" or orporation name	The new the abbreviation must contain the
B. Enter new principal office address, if a (Principal office address <u>MUST BE A STR</u>		N/A	<u></u>	
C. Enter new mailing address, if applica (Mailing address <u>MAY BE A POST OF</u>		ИА		
D. If amending the registered agent and/ new registered agent and/or the new i		in Florida, enter tl	ne name of the	
Name of New Registered Agent	AL N			
_	(Florida street d	address)		
New Registered Office Address:	(City)	, F	lorida(Zip Co	de)
New Registered Agent's Signature, if cha I hereby accept the appointment as register		and accept the obli	gations of the pos	sition.
٨	I A ature of New Registered Age			
Sian	nture of New Registered Age	nt if changing	<del></del> _	

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	1	
X Remove	<u>v</u>	Mike Jones	N / J N	
<u>X</u> Add	<u>sv</u>	Sally Smith	M/A	
Type of Action (Check One)	<u>Title</u>	Name	,	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		-		
Add				
Remove				
6) Change				
Add		<del>-</del>		
Remove				

	(Be specific)
NIA	
N I H	
	<u> </u>
	<del></del>
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, 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 (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:

date this document was signed.	option:	, if other than
J		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	_ <del>_</del>
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient 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)	
	(voting group)	
The amendment(s) was/were ado 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	
Dated M	ARCH 23 2015	
Signature	Dany Grin	
selected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	NANCY GIVENS	
	(Typed or printed name of person signing)	
	TREASURER	
	(Title of person signing)	<del></del>