P96000102737

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SECRETARY OF STATE ALLAHASSEE, FLORID

SECRETARY OF STATE DIVISION OF CORPORATION

Amend

JUN 2 2 2012

T. BROWN

COVER LETTER

Division of Corporations DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company STVFAM & YANDS (Cow E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: TOM VIETH 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 Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

OIVISION OF	FILED RY OF STATE CORPORATIONS
12 JUN 22	CORPORATIONS AM 11: 25

VIETA COLKTON	Tion, HY			AM 11:35
(Name of Corporation as currently file	d with the Florida Dep	t, of State)		
P9600010273	7	·		
(Document Number of Co	orporation (if known)			
Pursuant to the provisions of section 607.1006, Florida S ts Articles of Incorporation:	Statutes, this <i>Florida Pr</i>	ofit Corporation ad	opts the following	g amendment(s)
A. If amending name, enter the new name of the corp	ooration:			
				The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp." word "chartered," "professional association," or the ab	"Inc," or "Co". A pr	any," or "incorpo cofessional corpora	rated" or the ab tion name must c	obreviation contain the
3. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDR</u>	<u>ESS</u>)			
			·	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX))			
				
			· · · · · · · · · · · · · · · · · · ·	
 If amending the registered agent and/or registered new registered agent and/or the new registered of 	d office address in Flor	ida, enter the nam	e of the	
	Het Hadressi			
Name of New Registered Agent				
	(Florida street address)			
New Registered Office Address:		, Florida		
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing Regist	tered Agent			
hereby accept the appointment as registered agent. 1 c	am familiar with and ac	cept the obligations	of the position.	
Signature of New	Registered Agent if che	angina		

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.

<u>X</u> Change	<u>PT</u> <u>Joh</u>	nn Doe	
X Remove	<u>v</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	VP_	SEAD EDWARD VIETH	3201 BIRD AVE COCONUT CROVE FC. 33133
2) Change Add Remove			
3) Change Add Remove			·
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Arti-	icles, enter change(s) here:
(attach additional sheets, if necessary).	(Be specific)
<u> </u>	
_	
_	
	<u> </u>
·	•
. If an amendment provides for an exchange	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(g not approache, maleure 1971)	

The date of each amendment(s) a	doption: 6-22-12
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
. by	(voting group)
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated	-22-12
Signature	Dhomas L Viet
selecte	lirector, president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court sted fiduciary by that fiduciary)
	THOMAS LOUS VIETH
•	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)