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**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	007.00		of Jacksonville, Inc	
	Amendment and ice are su	bmitted for filing.		
Please return all correspo	ondence concerning this ma	tter to the following:		
	93 3	Firm/ Company  Address  Address  City/ State and Zip Code	d Stores of Jack Shores Lane FC32257	Zsonuillo, Inc
For further information of	range address: (to be us	ed for future annual report	notification)	
Name of	Contact Person	h at ( 904)	de & Daytime Telephone Number	
Enclosed is a check for t	he following amount made	payable to the Florida Depa	rtment 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)	
Ameno Divisio	ng Address dment Section on of Corporations Box 6327	Amend Divisio	Address ment Section n of Corporations Building	

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment

to

## **Articles of Incorporation**

(Name of Corporation as currently filed)	with the Florida DDDD	<u>a Dept. of State</u>	<u>*</u> ) <b>/</b>				
(Document Number of Cor	poration (if knov	wn)					
Pursuant to the provisions of section 607.1006, Florida Staits Articles of Incorporation:	tutes, this <i>Florid</i>	da Profit Corpo	ration adopts th	ne following	g amend	iment(s) to	i
A. If amending name, enter the new name of the corpo	ration:						
					The n	iew	
name must be distinguishable and contain the word "c "Corp.," "Inc.," or Co.," or the designation "Corp," " word "chartered," "professional association." or the abb	Inc," or "Co".	A professional					
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE.	<u> </u>						
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )					14 AUG 29 PH	SANCT ON MOISIANCE CORPORATE OF	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office.		n Florida, enter	the name of the	<u>1e</u>	1:56	SKOTIVE SESTIN	•
Name of New Registered Agent							
	(Florida street ad	ldress)					
New Registered Office Address:	(1)		, Florida		,		
	(Ciţy)		(Zi	p Code)			
New Registered Agent's Signature, if changing Registe							
I hereby accept the appointment as registered agent. I an	ı familiar with a	ind accept the o	bligations of the	e position.			
Signature of New R	egistered 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 <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:	, una san	ıy əmmi	ээ то ин хий.	
X Change	<u>PT</u>	John Do	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	VF	<b>&gt;</b>	Mowafak Shalle	7 9321 Cypress Shores Lane Jacksonville, FC32257
Remove				
2) Change		<del>-</del>		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change			<del></del>	
Add	•			
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

(Attach additional sheets, if necessary). (Be specific)  F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself.  (if not applicable, indicate N/A)	E. If amending or adding additional Articles, enter change(s) here:	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	(Attach additional sheets, if necessary). (Be specific)	
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(if not applicable, indicate N/A)	provisions for implementing the amendment if not contained in the amendment itsel	f:
	(if not applicable, indicate N/A)	_
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The date of each amendment(s) adoption: date this document was signed.  Effective date if applicable:	8 26 14 8 26 4 no more than 90 days after ame	14 AUG 29 PM 1:56	if other than the
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by the shareholders was/were sufficient for appropriate amendment(s) was/were approved by the shareholders was/were sufficient for approximation and the shareholders was/were sufficient for approximation approximat	narcholders through voting group		
"The number of votes cast for the amendr	·	oproval ,,	
by	group)	·″	
The amendment(s) was/were adopted by the boa action was not required.		der action and shareholder	
The amendment(s) was/were adopted by the incaction was not required.	orporators without shareholder a	action and shareholder	
Dated	14		
(By a director, preside	nt or other officer — if directors or other of in the hands of a rece that fiduciary)	ver, trustec, or other court	
	(Typed or printed name of p	erson signing)	
	President		
	(Title of person sign	ing)	