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TALLAHASSEE FLORIDA

TALLAHASSEE FLORIDA

NOV 0 7 2018

S. YOUNG

COVER LETTER

NAME OF CORPORATION: 0000 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 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 (Additional Copy enclosed) is enclosed)

Mailing Address

TO: Amendment Section

Division of Corporations

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

of

Mutt Management.	enc.	
(Name of Corporation as currently	filed with the Florida Dept. of State)	
P970000 69766		
(Document Number of	Corporation (if known)	
		and-ant(u) to
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	norda Proju Corporation adopts the following ame	enameni(s) to
A. If amending name, enter the new name of the corporation:		
	TL.	
name must be distinguishable and contain the word "corporation.		e new viation
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C	Co". A professional corporation name must conta	in the
word "chartered," "professional association," or the abbreviation "F	³ .A."	
B. Enter new principal office address, if applicable:	$\mathcal{N}\mathcal{N}$	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		
	=s:	<u>~</u>
		
C. Enter new mailing address, if applicable:		é T
(Mailing address MAY BE A POST OFFICE BOX)	\mathcal{N}	1
	Maria Maria	_ [
	<u> </u>	- 基 0
	<u> </u>	<u></u>
D. 16	On:	09
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:		
Λ)_	A	
Name of New Registered Agent /V		
(Florida stre	et address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code))
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	with and account the abligations of the position	
т негеоу ассері іне арронітені аз regisierea ageni. тат jamiliar w	пп ана ассері те отявають пу те роктоп.	
, Λ		
AH		
Signature of New Re	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)

Remove

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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	\bigvee	_ James M. Irland	3300 Rustic Ro Makanis, 76.
Add		•	Mokamis, 7l.
Х Реточе			34275
2) Change			
Add			W-WW
Remove			
3) Change			••••
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Came a Irland to be taken and Co
The carrier of the ca
la conger fart of it to mor when it
On Co. again, 7) othing to go to him
at E mail on Roglan mail.
· · · · · · · · · · · · · · · · · · ·
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)

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amend by the shareholders was/were sufficient for approval.	lment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for 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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sha action was not required.	reholder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareho action was not required.	lder
Dated 04, 30, 18	
Signature harlotte Likey	
(By a director, president or other officer - if directors or officers have no	
selected, by an incorporator – if in the hands of a receiver, trustee, or oth	er court
appointed fiduciary by that fiduciary)	
Charlotte H!CKey (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	<u> </u>
(Title of person signing)	