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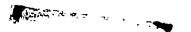
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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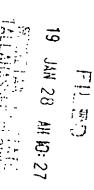


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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: R.A. Johnson, Inc. DOCUMENT NUMBER: P97000086021 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Richard A. Johnson, Sr. Name of Contact Person R.A. Johnson, Inc. Firm/ Company 5644 Tavilla Circle, Suite 105 Address Naples, Florida 34110 City/ State and Zip Code rajtires@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ($\frac{239}{}$) $\frac{261-0592}{}$ Area Code & Daytime Telephone Number Matthew P. Flores, Esq. Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □S52.50 Filing Fee ■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

R.A. Johnson, Inc.	_			
(<u>Name of Corporation</u>	n as currently !	filed with the Florida	a Dept. of State	<u>e</u>)
P97000086021				
(Docume	ent Number of C	Corporation (if known)	
Pursuant to the provisions of section 607,1006. Florida Sits Articles of Incorporation:	Statutes, this F7	orida Profit Corpora	tion adopts the	following amendment(s)
A. If amending name, enter the new name of the cor	poration:			
				The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp.," word "chartered," "professional association," or the a	" "Inc." or "Ce	i". A professional c	ncorporated" orporation nan	or the abbreviation
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDE</u>	<u>RESS</u>)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u>:</u>)			19
				至一
				28
				<u></u>
 If amending the registered agent and/or registere new registered agent and/or the new registered or 		s in Florida, enter tl	he name of the	M 6: 27
Name of New Registered Agent				27
				
	tFlorida stree	t address)		
North State and CMS and Library			171 and dis	
New Registered Office Address:	((, Florida	(Zip Code)
New Registered Agent's Signature, if changing Regis Thereby accept the appointment as registered agent. I		th and accent the obli	antions of the n	moitina
The conference of the conferen		and accept the only	Saman di me t	*************
Signal	mre of Nove Rea	distanced Amount of chair	naina	

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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	VP	Richard A. Johnson, Jr.	5644 Tavilla Circle
Add			Suite 105
X Remove			Naples, Florida 34110
2) Change	S T	Rosie A. Johnson	5644 Tavilla Circle
X Add			Suite 105
Remove			Naples, Florida 34110
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
Kemove			
6) Change			~
Add			
Remove			

Attach addition	adding additional Articles, e al sheets, if necessary). (Be	specific)			
		•	,		
					
					
			- 		
					
If an amoudm	nt provides for an exchange,	realization a	our calletion of icon	and observe	
provisions fo	implementing the amendme	nt if not contained	in the amendment it	self:	
(if not ap _i	licable, indicate N A)				
					
					-
					
					
					
			,		

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	it.
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
,	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
action was not required. Dated Signature	director, preciping or otherwise — If directors or others have not been ted, by an incomporator—if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary) Richard A. Johnson, Sr. (Typed or printed name of person signing)	
	President	
	(Title of person signing)	