P970008U509

| (Re | equestor's Name) |
|-------------------------|------------------------|
| (Ac | ddress) |
| (Ac | ddress) |
| (Ci | ty/State/Zip/Phone #) |
| PICK-UP | ☐ WAIT ☐ MAIL |
| (Bı | usiness Entity Name) |
| (De | ocument Number) |
| Certified Copies | Certificates of Status |
| Special Instructions to | Filing Officer: |
| | |
| | |
| | |
| | Office Use Only |



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FILED
2017 OCT -6 AN 10: 57

_C. GOLDEN 0CT - 9 2017

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | ATION: THE BRUNTON- | MCCARTHY CPA FIRM, | CHARTERED | | |
|--|---|--|---|-----------------------------|--|
| DOCUMENT NUMBE | ER: P97000086509 | | | | |
| The enclosed Articles o | f Amendment and fee are su | bmitted for tiling. | | | |
| Please return all corresp | ondence concerning this ma | tter to the following: | | | |
| ŀ | KELLY STRACHAN | | | | |
| Name of Contact Person | | | | | |
| THE BRUNTON-MCCARTHY CPA FIRM | | | | | |
| _ | Firm/ Company | | | | |
| 4710 NW BOCA RATON, #101 | | | | | |
| Address | | | | | |
| BOCA RATON, FL 33431 | | | | | |
| City/ State and Zip Code | | | | | |
| K 8791 | 'AXINTL.COM | | | | |
| | | sed for future annual report | notification) | | |
| | 13 min undress, (10 the til | ica in raine amina report | notification , | | |
| For further information | concerning this matter, pleas | se call: | | | |
| KELLY STRACHAN | | 561 at (| 241-9991 | | |
| Name of | Contact Person | Area Co | de & Daytime | Felephone Number | |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | irtment of State | : | |
| S35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$52.50 Fill Certificate Certified C (Additional is enclosed | of Status lopy I Copy | |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Amend Divisic Clifton 2661 E | Address Iment Section on of Corporatio Building Executive Center assee, FL 32301 | Circle | |

Articles of Amendment to Articles of Incorporation of

FILED

THE BRUNTON-MCCARTHY CPA FIRM, CHARTERED

2017 OCT -6 AH 10: 57

| | _ | | | |
|--|-----------------------------|-----------------------------|---------------------|----------------------|
| (<u>Name of</u> | Corporation as current | ly filed with the Florida D | ept. of State) | |
| P97000086509 | | | \a) | Section Utable |
| | (Document Number o | of Corporation (if known) | | |
| Pursuant to the provisions of section 607.1 its Articles of Incorporation: | 006, Florida Statutes, this | Florida Profit Corporation | adopts the follow | ving amendment(s) to |
| A. If amending name, enter the new nar | ne of the corporation: | | | |
| THE BRUNTON, STRACHAN & KHAN | CPA FIRM, CHARTER | ED | | The new |
| name must be distinguishable and conta "Corp." "Inc.," or Co.," or the designa word "chartered," "professional associati | tion "Corp," "Inc," or | "Co" A professional corp | | abbreviation |
| B. Enter new principal office address, if | 'annticable: | N/A | | |
| (Principal office address MUST BE A ST | | | | |
| | | | | |
| | | | | |
| C. Enter new mailing address, if applic | | N/A | | |
| (Mailing address <u>MAY BE A POST O</u> | <u>FFICE BOX</u>) | | | |
| | | | | |
| | | | | |
| D. If amending the registered agent and | | | name of the | |
| new registered agent and/or the new | registered office addres | 81 | | |
| Name of New Registered Agent | N/A | | | |
| | | | | |
| - | (Florida si | reet addressi | | |
| <u>New Registered Office Address:</u> | N/A | | . Florida | |
| New Megisterea Office Matters. | | (City) | | tip Coder |
| | | | | |
| New Registered Agent's Signature, if ch. I hereby accept the appointment as registe. | | | ions of the positio | v1. |
| | | · | | |
| | | | | |
| | Signature of New | Registered Agent, if changi | <u> </u> | _ |

| address of each Office (Attach additional sheet Please note the officer/a P = President; V= Vico Executive Officer; CFO held, President, Treasus Changes should be note a change, Mike Jones le | r and/or I s, if neces, lirector tit e Presiden e Chief ver, Direct ed in the fa veves the c | Director being added: sary) le by the first letter of the office title: t; T= Treasurer; S= Secretary; D= L Financial Officer. If an officer/direct or would be PTD. Howing manner. Currently John Doe | of each officer/director being removed and title, name, and Director: TR= Trustee: C Chairman or Clerk: CEO = Chief or holds more than one title, list the first letter of each office is listed as the PST and Mike Jones is listed as the V. There is V and S. These should be noted as John Doe, PT as a Change. |
|---|--|--|---|
| X Change | PT | John Doe | |
| X Remove | <u>V</u> | Mike Jones | |
| X Add | <u>SV</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | N/A | N/A | N/A |
| Add | | | |
| Remove | | | |
| 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 Articles, enter change(s) here: | |
|---|---------------|
| (Attach additional sheets, if necessary). (Be specific) N/A | |
| IV/A | |
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| F. If an amendment provides for an exchange, reclassification, or cancellation of issued provisions for implementing the amendment if not contained in the amendment itself. | shares, f: |
| (if not applicable, indicate N/A) N/A | |
| | |
| | |
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| | |

| The date of each amendment(s) adoption: | , if other than the |
|---|--|
| date this document was signed. | |
| 10/03/17 | |
| Effective date if applicable: (no more than 90 days after a | amandment (ib. data) |
| tho more than 50 days after t | ameriament file date) |
| Note: If the date inserted in this block does not meet the applicable statutor document's effective date on the Department of State's records. | y filing requirements, 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 v by the shareholders was/were sufficient for approval. | otes cast for the amendment(s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting g must be separately provided for each voting group entitled to vote separate | |
| "The number of votes cast for the amendment(s) was/were sufficient for | or approval |
| by(voting group) | <i>;</i> • 1 |
| (voting group) | |
| ☐ The amendment(s) was/were adopted by the board of directors without share action was not required. | eholder action and shareholder |
| ☐ The amendment(s) was/were adopted by the incorporators without sharehold action was not required. | der action and shareholder |
| Dated | |
| Signature | |
| (By a director, president or other officer – if direct | ors or officers have not been |
| selected by an incorporator - if in the hands of a r | receiver, trustee, or other court |
| appointed fiduciary by that fiduciary) | |
| S. L. RICHARD BRUNTON | |
| (Typed or printed name of person | on signing) |
| PRESIDENT | |
| (Title of person sign | ning) |