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TO: Amendment Section Division of Corporations

AME OF CORPORATION: PARFAM, INC.					
DOCUMENT NUMBER:	P980000	255 <u>4</u> 0			
The enclosed Articles of Amendme	ent and fee are su	bmitted for filing	ļ.		
Please return all correspondence co	ncerning this ma	tter to the followi	ing:		
		. Christophe	<u>r Parke</u>	<u>er</u>	
Name of Contact Person					
		Parfam, I	nc.		
		Firm/ Co		<u> </u>	
2027 Eastern Drive					
	Address				
	Jacksonville Beach, FL 32250				
		City/ State and			
		•			
H-mail:	jchri address: (to be us	s@parkeras	sociate	es.com	
	rantos, (10 de as	ca ro. ratare ann	иат терепт	TRAITIC ARION)	
For further information concerning	this matter, pleas	e call:			
L Chair Ba	1				
J. Chris Par		at (_904)607-8761	
Name of Contact Pe	rson		Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following	g amount made p	payable to the Flo	rida Depa	irtment of State:	
	5 Filing Fee & icate of Status	□\$43.75 Filing Certified Cop (Additional e- enclosed)	py	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address			Street	Address	
Amendment Secti		Amendment Section			
Division of Corpe P.O. Box 6327	Division of Corporations Clifton Building				
Tallahassee, FL 3	2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

PARFAM, INC.

- · · · · · · · · · · · · · · · · · · ·	y filed with the Florida Dept. of State)
P980000255	40
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporatio" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	'Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address Name of New Registered Agent	
(Florida su	reet address)
New Registered Office Address:	, Florida
New Regimered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	: with and accept the obligations of the position. Registered 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:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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: <u>X</u> Change	PT	John Doc	
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	D	Bert H. Parsley	2225 First St, Suite 201
X_ Add			Fort Myers, FL 33901
Remove			
2) Change			
Add			
Remove			
3)Change		_	
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	_		_
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	
·		
	· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an exch:	inge, reclassification, or cancellati	on of issued shares,
provisions for implementing the amen (if not applicable, indicate N/A)	dment if not contained in the ame	ndment itself:
		
		
		

The date of each amendment(s) add	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	November 1, 2018	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this artment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adop by the shareholders was/were suff	ited by the shareholders. The number of votes cast for the amendme ficient for approval.	nt(s)
☐ The amendment(s) was/were appromust be separately provided for e	oved by the shareholders through voting groups. The following state ach voting group entitled to vote separately on the amendment(s):	rment
"The number of votes east fe	or the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareho	older
☐ The amendment(s) was/were adoptaction was not required.	ted by the incorporators without shareholder action and shareholder	
DatedNo	vember 9, 2018	
Signature	1 (Yally	
(By a din selected	ector, president of other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other co	en
appointe	d fiduciary by that fiduciary)	our
	J. Christopher Parker	
_	(Typed or printed name of person signing)	
_	Director	
	(Title of person signing)	