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(Requestor's Name)			
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(City	y/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
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Certified Copies	Certificates	s of Status	
Special Instructions to I	Filing Officer:		





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COVER LETTER

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION:	INC.	
DOCUMENT NUMBER: P 98 0000 4	9899	
The enclosed Articles of Amendment and fee are submitted	ed for filing.	
Please return all correspondence concerning this matter to	the following:	
Noë/ Moe Noë/co, I	ame of Contact Person W.C. Firm/ Company	
	12914 Magnolia Pointe Blvd	
	/Glermont, FL 34711	
С	ity/ State and Zip Code	
E-mail address: (to be used for	or future annual report notification)	
For further information concerning this matter, please cal	l:	
NoEl MoENSSENS Name of Contact Person	at (<u>407</u>) <u>467 – 6515.</u> Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made payal		
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)	
Mailing Address	Street Address	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment

• •	to Articles of Incorporation	73 (%)
	of	~
(Name of Cornoration as curren	NOELCO, LNC.	
P98 0	000 49299	
(Document Numb	per of Corporation (if known)	
cursuant to the provisions of section 607.1006, F as Articles of Incorporation:	lorida Statutes, this Florida Profit Corporation	on adopts the following amendment(s)
. If amending name, enter the new name of t	he corporation:	
came must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation " pord "chartered," "professional association," o	Corp," "Inc," or "Co". A professional cor	
3. Enter new principal office address, if appli Principal office address <u>MUST BE A STREET</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)	
. If amending the registered agent and/or renew registered agent and/or the new regist		name of the
Name of New Registered Agent		<u></u>
·	(Florida street address)	
New Registered Office Address:	, Flo	orida
•	(City)	(Zip Code)
New Registered Agent's Signature, if changing	Registered Agent:	
hereby accept the appointment as registered ag		utions of the position.

Signature of New 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: X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	D	Willy MOENSSENS	CHURCHI 180 SCHOTEN
<u></u> ★ Add			SCHOTEN
Remove			BE 2900
2) Change	· 	<u> </u>	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	al sheets, if necessary). (Be specific)			
			····	··· · · · · · · · · · · · · · · · · ·	
					
		 	 		
					
<u> </u>					
					
an amendmer	nt provides for an ex implementing the a	mendment if not co	ontained in the a	<u>mendment itself:</u>	ares,
rovisions for	licable, indicate N/A))			
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The date of each amendment(s) ad date this document was signed.	option:	, if other than th
Effective date if applicable:	9/16/13	
Interior date in applicable.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast i	for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder	
Dated		
Signature	Mocanan	
(By,a dj	vector, president or other officer – if directors or officers have not been	
selected	, by an incorporator – if in the hands of a receiver, trustee, or other court	
āppoint	ed fiduciary by that fiduciary)	
	NoEl MoENSSANS (Typed or printed name of person signing)	<u>. </u>
	(Typed or printed name of person signing)	
	PRESIDENT.	
	(Title of person signing)	