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COVER LETTER

Division of Corporations NAME OF CORPORATION: Angelle T Bussell CPAPA DOCUMENT NUMBER: 7980 00056 226 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call. at (964) 384-3464 Area Code & Daytime Telephone Number Name of Contact Person 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 Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

FILEO SECRETARY OF LIAGE DIVISION OF CORFORATIONS

Annette T. Busell CPA PA 15 JUL 29 AM 10: 32
(Name of Corporation as currently filed with the Florida Dept. of State)
198000056226
(Document Number of Corporation (1f known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association." or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
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 address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent Annata Patts
767 Stockton Street (Florida street address)
New Registered Office Address: Sacks 10, Florida 3220 (City), Florida (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.
Signature of New Registered Agent, if changing (name of)

P = President; V= Vice I Executive Officer; CFO : held. President, Treasure Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove	rector title by the f President; T= Tre = Chief Financial r, Director would in the following n wes the corporatio	Officer. If an officer/director holds more to be PTD. nanner. Currently John Doe is listed as the sent of the sen	Prustee; C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office PST and Mike Jones is listed as the V. There is should be noted as John Doe, PT as a Change,
Example: XChange	PT John Do	<u>oe</u>	
X Remove	V Mike Jo	<u>ones</u>	
X Add	SV Sally Si	nith_	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	Paes	Annette Pitts	767 Stocklast-
Add			Jackson V. U +13220
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			

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:

__ Remove

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	Fig. 9
Effective date if applicable:	FILLES SEGRETARY OF STATE DIVISION OF CORPEASTIONS
(no more than 90 days after amendmen	1 file date)
	15 JUL 29 AM 10: 33
Note: If the date inserted in this block does not meet the applicable statutory filing redocument's effective date on the Department of State's records.	quirements, 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 by the shareholders was/were sufficient for approval.	or the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the content of the c	
"The number of votes cast for the amendment(s) was/were sufficient for approva	ıl
by	21
(voting group)	_
☐ The amendment(s) was/were adopted by the board of directors without shareholder ac action was not required.	tion and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action action was not required.	and shareholder
Dated 1/27/15	
Signature (By a director, president or other officer – if directors or officer selected, by an incorporator – if in the hands of a receiver, trappointed fiduciary by that fiduciary)	
Typed or printed name of person signing)
(Title of person signing)	