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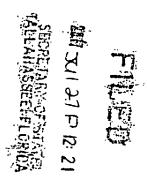
(Red	uestor's Name)	·
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificate	s of Status
Special Instructions to F	filing Officer:	
	Office Use Or	nlv



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: R & S HOPPE & F	AMILY INC.	···
DOCUMENT NUM	BER: CC1596490602		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	LISA ZAHORIAN		
		Name of Contact Person	1
	TAX & FINANCIAL STRAT	regists llc	
	<u> </u>	Firm/ Company	
	28089 VANDERBILT DR., S		
		Address	
	BONITA SPRINGS, FL		
		City/ State and Zip Code	Ľ
For further information	E-mail address: (to be us	sed for future annual report	notification)
LISA ZAHORIAN		a1 (239	405-8395
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & 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)
Am Div P.C	iling Address endment Section ision of Corporations b. Box 6327 lahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301



July 18, 2017

LISA ZAHORIAN 28089 VANDERBILT DR STE 201 BONITA SPRINGS, FL

SUBJECT: R & S HOPPE & FAMILY, INC.

Ref. Number: P98000107673

We have received your document for R & S HOPPE & FAMILY, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This is a Corporation the document you sent in is for a LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 817A00014531

www.sunbiz.org

DO DOV GOOD TO U. I. DI CL. CON-

Articles of Amendment to Articles of Incorporation of

R & S HOPPE & FAMILY, INC

The new company," or "incorporation name must contain the
The new company," or "incorporated" or the abbreviation A professional corporation name must contain the
The new company," or "incorporated" or the abbreviation A professional corporation name must contain the
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Florida, enter the name of the
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)

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 Do	<u> </u>	
X Remove	<u>v</u>	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change	VP		SAMUEL JACOB HOPPE	2175 MALIBU LAKES CIR
X Add				#1315
Remove				NAPLES, FL 34119
2) Change				
Add				
Remove				
3) Change		<u> </u>	-	
Add				
Remove				
4) Change	••••	_		
Add				
Remove				
5) Change		<u>. </u>		
Add				
Remove				
_				
6) Change				
Add				
Remove				

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)			
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If an amendment provides for an exch provisions for implementing the ame	ange, reclassification, idment if not containe	or cancellation of d in the amendme	nt itself:	
(if not applicable, indicate N/A)				
	 		· · · · · - · · · ·	

The date of each amendment(s) adoption:, if other than the
date this document was signed.
Effective date if applicable: (no more than 90 days after amendment file date)
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (<u>CHECK ONE</u>)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by"
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
JULY 24, 2017 Dated
Signature & Oncel J. Happe
(By a director, president or other officer—if directors of officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
SAMUEL L. HOPPE
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)