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(Requestor's Name) (Address)	500282442885
(City/State/Zip/Phone #)	01/15/1601013012 **35.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	FEB 26 PH 3: 56 SECRETARY DE STATE ALLAHASSEE, FLORIDA
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ______FACILITY PRO, INC.

DOCUMENT NUMBER: _____

The enclosed Articles of Amendment and fee are submined for filing.

Please return all correspondence concerning this matter to the following:

CHRISTIAN@THEFACILITYPRO.COM

Name of Contact Person

FACILITY PRO, INC.

Firm/ Company 6451 N FEDERAL HWY #408

Address

FORT LAUDERDALE, FL 33308

City/ State and Zip Code

CHRISTIAN@THEFACILITYPRO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHRISTIAN FERNANDEZ	786	277-7534
	_ at ()
Name of Contact Person	Area Code	& Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address 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



FACILITY PRO, INC.

(Name of Corporation as currently filed with the Florida Pentrof State) OF STATE TALL AHASSEE, FLORIDA

P99000039313

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006. Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new 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. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST_BE_A_STREET_ADDRESS</u>)

- C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)
- 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

(Florida street address)

New Registered Office Address:

(City)

(Zip Code)

, Florida

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 Agem, if changing

Page 1 of 4

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

L vample: <u>X</u> Change	<u>PT</u> <u>John</u>	John Doe		
X Remove	<u>V</u> <u>Mike</u>	· Jones		
<u>X</u> Add	<u>SV</u> <u>Saily</u>	Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	CLERK	MICHEAL FRANCIS SWITZ III	341 NW 134 AVE	
XAdd			PLANTATION, FL 33325	
Remove				
2) Change	·	·····		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add			·	
Remove				
5) Change	·			
Add				
Remove				
b) Change				
Add			<u></u>	
Remove				

E.	<u>lf яп</u>	<u>iendir</u>	<u>g or</u>	adding	additional	Articles, ente	<u>r change(s) here</u> :

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(Attach additional sheets, if necessary). (Be specific)

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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate NA)

Page 3 of 4

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2/26/16
The date of each amendment(s) adoption:, if other than th date this document was signed.
Effective date if applicable:
(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 th document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
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.
2/26/16 Dated
Signature
CHRISTIAN FERNANDEZ
(Typed or printed name of person signing)
VICE PRESIDENT
(Title of person signing)