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R. WHITTS. AUG 22 2012 2018 AUG 20 PM 1: 38 SECRETARY OF STATE

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## COVER LETTER

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2661 Executive Center Circle

Tallahassee, FL 32301

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: THE AV	HATOR, INC			
DOCUMENT NUMBER: 2990000 579923					
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	oondence concerning this mat	tter to the following:			
	THE AMATO P.D. BOX & LIMATILL PSSE@ Theory	Name of Contact Person  R. Two.  Firm/ Company  Address  Address  A Floriba  City/ State and Zip Code  Technology Code  Techn	32784		
For further information concerning this matter, please call:					
1	Canal	<b>79</b> 0	CATT CITY		
	SMITH FContact Person	at ( <b>23</b> 9 Area Coo	) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
	the following amount made p		•		
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)		
Amer Divis	ing Address idment Section ion of Corporations Box 6327	Amend Divisio	Address ment Section n of Corporations Building		

## Articles of Amendment to Articles of Incorporation of

FIL	E	D
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THE	ANIATOR.	INC	2018 AUG 20 P	
( <u>Name of</u>	Corporation as curren	tly filed with the F	inring Dont of State:	. 011
	P990000	59923	TALLAHASSE	STATE
	(Document Number		nown)	E.F.L
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this	s Flor <mark>ida Pro</mark> fit Co	rporation adopts the follow	ving amendment(s) t
A. If amending name, enter the new name	ne of the corporation:			
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designational "chartered," "professional association	tion "Corp," "Inc," or	"Co". A profession	or "incorporated" or the onal corporation name mu	The new abbreviation ust contain the
B. Enter new principal office address, if (Principal office address MUST BE A ST.)			BLANCHESTER	
C. Enter new mailing address, if application (Mailing address MAY BE A POST Of		P.o. B	CA, I-L. 327	
D. If amending the registered agent and new registered agent and/or the new	Vor registered office addre	dress in Florida, ci		
Name of New Registered Agent		<del></del>		
-		NCHESTEV	2 07.	<del>_</del>
New Registered Office Address:	MULTILLA	(City)	, Florida <u>3</u> <b>3</b>	784 (ip Code)
New Registered Agent's Signature, if chi I hereby accept the appointment as register	anging Registered Agen red agent. I am familiar	it: with and accept th	e obligations of the positio	n.
	Signature of New	Registered Agent,	f 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 Do	<u>9e</u>	
X Remove	V	<u>Mi</u> ke Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) Change		_		
Add				
Remove				
2) Change				
Add		_		
Remove				
3 ) Change		<del></del>		
Add				
Remove				
4) Change				
Add				
Remove				
<del></del>				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Damoua				

<ol> <li>If amending or adding a (Attach additional sheets.</li> </ol>	dditional Articles, e if necessary). (Be:	nter change(s) her specific)	<u>'e</u> :		
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(5)17			<del></del>		
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If an amandment provide	las for un ovahunga	madaccification a	r annuallation of ive	and charge	
If an amendment provice provisions for impleme	nting the amendmer	nt if not contained	in the amendment	itself:	
(if not applicable, in	idicate N/A)				
N/A					<u> </u>
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		= -			
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The date of each amendment(s) ado date this document was signed.	ption: <u>SE'PT 1, 2018</u>	, if other than the
date this document was signed.	_	
Effective date if applicable:	SEDT 1, 2018 (no more than 90 days after amendment fi	ila duta)
	(no more than 50 days after amenament fi	ne actie)
Note: If the date inserted in this blo document's effective date on the Depart	ock does not meet the applicable statutory filing requartment of State's records.	irements, this 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	ted by the shareholders. The number of votes cast for icient for approval.	the amendment(s)
	oved by the shareholders through voting groups. The fact voting group entitled to vote separately on the am	
"The number of votes cast fo	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 actio	on and shareholder
The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action an	d shareholder
Dated Aug	. 15, 2018	
Signature	swed & Smith	
	ector, president or other officer - if directors or office	
	by an incorporator – if in the hands of a receiver, trus d fiduciary by that fiduciary)	tee, or other court
	Harold J. SMITH	
-	(Typed or printed name of person signing)	
	PRESIDENT	
_	(Title of person signing)	