P99000078586

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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CPOK INC
DOCUMENT NUMBER: P9900078586
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Michael Kungham Name of Jontact Person
Firm/ Company as Sty St NW
Address Winter Haven Fl 33884 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mike Kengham at (863) 291.4268
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:
\$35 Filing Fee

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

e Politina	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P99000078586	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>corporation</i> adopts the following amendment(s) Incorporation:	to its Articles of
A. If amending name, enter the new name of the corporation:	
Kingham Holdings Inc	The new
name must be distinguishable and contain the word "corporation," "ompany," or "incorporated" or the abb "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must co word "chartered," "professional association," or the abbreviation "P.A."	reviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ca ca
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	FILED FILL
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 H/A	
(Florida street address) New Registered Office Address: (City) (Florida street address) (City) (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	

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 Doe						
X Remove	<u>v</u>	Mike Jon	es	1				
<u>X</u> Add	<u>sv</u>	Sally Smi						
Type of Action (Check One)	<u>Title</u>]	Name		<u>Add</u>	<u>·es</u> s		
1) Change								
Add						· · · · · · · · · · · · · · · · · · ·		·
2) Change		<u>.</u>						_
Add								
Remove 3) Change								
Add								
Remove								
4) Change								
Add								
5) Change	_							
Add								
Remove					<u> </u>		,	
6) Change Add		 ,						
Pamova								

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 N/A)	Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)		
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(if not applicable, indicate N/A)	f an amendment provides for an excl	nange, reclassification, or cancellation of issued shares,
	(if not applicable, indicate N/A)	endment it not contained in the amendment itself:
	,	

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)	
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)	
(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.	
Dated 6.30.16	
Signature	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) .	
Michael Kengham (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	