## P99000108143

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## **COVER LETTER**

TO: Amendment Section

Division of Corpo	orations		
NAME OF CORPOR	RATION: Feil BER: P9900	Inc.	
The enclosed Articles	of Amendment and fee are sub	bmitted for filing.	
Please return all corres	Please return all correspondence concerning this matter to the following:		
	Gera	ild Feil	
,	Fe.	Name of Contact Person	2KWY L 33966
	12034	Firm/Company Metru /	OKWY
	Fort 1	Myers, F	L 33966
	_	City/ State and Zip Code	2
	andea c t	Feil. US	
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Geral	d Feil	at ( 239	454-1913
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tailahassee, FL 32301

## **Articles of Amendment** to Articles of Incorporation

Feil T	of
(Name of Corporation	on as currently filed with the Florida Dept. of State)
· · · · · · · · · · · · · · · · · · ·	0108143
	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:
nama must be distinguishable and court the	The new
"Corp.," "Inc.," or Co.," or the designation "Corp,	d "corporation," "company," or "incorporated" or the abbreviation " "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 ADD	
C. Enter non-malling address (6. 1/ 1)	TO THE THE
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	
D. If amonding the model and a second of	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of the ne	ed office address in Florida, enter the name of the office address:
Name of New Registered Agent	
<del> </del>	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
N 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
New Registered Agent's Signature, if changing Registered agent the appointment as registered agent	<u>istered Agent:</u> I am familiar with and accept the obligations of the position.
The state of the s	- mirjaminia iran ana accept na conganons of the position.
Signo	ature 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 <math>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 Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
I) Change	VP	Andrea Feil	13191 Idylwild Farm Rd
Add			13191 Idylwild Farm Rd Fort Myers, FL
Remove			33905
2)Change	<u>.                                    </u>		
Add			
Remove			
3 ) Change	<del></del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here:  (Be specific)
<u>, , , , , , , , , , , , , , , , , , , </u>	
	<del></del>
·	
f an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
G appauto, manani 11/11)	
(y apparea, mareae)	
(y apparea, marcare)	
(y app	
(y app	
(y appare), mandate (mil)	

The date of each amendment(s) adoption: date this document was signed.	, if other than th
Effective date if applicable:	
(no more than 90 days after	r amendment file date)
Note: If the date inserted in this block does not meet the applicable statut document's effective date on the Department of State's records.	ory filing requirements, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separate	
"The number of votes cast for the amendment(s) was/were sufficient	for approval
by(voting group)	99
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without she action was not required.	areholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholaction was not required.	older action and shareholder
Signature  (By addirector, president or other officer – if director)	- Complete C
selected, by an incorporator – if in the hands of a	a receiver, trustee, or other court
appointed fiduciary by that fiduciary)	· · · · · · · · · · · · · · · · · · ·
Gerald F	eil
(Typed or printed name of per	rson signing)
President	
(Title of person si	oning)