Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000170742 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

(850) 617- 6380

From

Account Name : SWART BAUMRUK & COMPANY

Account Number : 120000000291

Phone

(407) 847-7466

Fax Number

: (407) 847-6641

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address pleases

Email Address:_

COR AMND/RESTATE/CORRECT OR O/D RESIGN **CLEANSING BY K. LYNN, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

		To: 9506176380@refax.con Fax: +18506176380	Page 2 of 5 07/13/2015 5:16 PM
	era i okaj olimania a # Granda i okaj olimania a	(((H15000170742 3)))	FILED
		Articles of Amendment	
·		to Articles of Incorporation	21 S JUL 14 AM 10: 18
•		of Cleansing By K. Lynn, Inc.	SMEET WAY OF STATE STATE STATE STATE
	(Na	me of Corporation as currently filed with the F	
		P99000109204	The state of the s
	<u> </u>	(Document Number of Corporation (if i	Giown)
	o the provisions of section of Incorporation:	607.1006, Florida Statutes, this Florida Profit Co	orporation adopts the following amendment(s
A. If ame	nding name, enter the ne	w name of the corporation:	
"Corp.,"	"Inc.," or Co.," or the de	contain the word "corporation," "company," esignation "Corp," "Inc," or "Co". A profession of the abbreviation "P.A."	
B. <u>Enter</u> (Principal	new principal office adds office address <u>MUST BE</u>	ress, if applicable: A STREET ADDRESS)	
	• • • • • • • • • • • • •		
		· · · · · · · · · · · · · · · · · · ·	
O 70.4		**************************************	
	new mailing address, if s ng address <u>MAY BE A PC</u>		
(Maili	ng address <u>MAY BE A PC</u>		nter the name of the
D. If sme	ng address <u>MAY BE A PC</u> nding the registered ager gistered agent and/or th	ot and/or registered office address in Florida, ed e new registered office address;	nter the name of the
D. If sme	ng address <u>MAY BE A PC</u>	ot and/or registered office address in Florida, ed e new registered office address;	nter the name of the
D. If sme	ng address <u>MAY BE A PC</u> nding the registered ager gistered agent and/or th	ot and/or registered office address in Florida, ed e new registered office address;	nter the name of the
(Maili	ng address <u>MAY BE A PC</u> anding the registered agen egistered agent and/or the	nt and/or registered office address in Florida, enew registered office address; zent (Florida street address)	
(Maili	ng address <u>MAY BE A PC</u> nding the registered ager gistered agent and/or th	nt and/or registered office address in Florida, enew registered office address; zent (Florida street address)	nter the name of the , Florida
(Maili	ng address <u>MAY BE A PC</u> anding the registered agen egistered agent and/or the	ont and/or registered office address in Florida, end registered office address; sent (Florida street address)	, Florida
(Maili	ng address <u>MAY BE A PC</u> anding the registered agen egistered agent and/or the	ont and/or registered office address in Florida, end registered office address; sent (Florida street address)	, Florida
D. If ame new re	nding the registered agent and/or the land of New Registered Agent and/or Agent Registered Agent Registered Agent Registered Office Addrostered Agent's Signature	ont and/or registered office address in Florida, end registered office address; sent (Florida street address)	, Florida(Zip Code)
D. If ame new re	nding the registered agent and/or the land of New Registered Agent and/or Agent Registered Agent Registered Agent Registered Office Addrostered Agent's Signature	ont and/or registered office address in Florida, ene new registered office address; zent (Florida street address) ress: (City)	, Florida(Zip Code)
D. If ame new re	nding the registered agent and/or the land of New Registered Agent and/or Agent Registered Agent Registered Agent Registered Office Addrostered Agent's Signature	ont and/or registered office address in Florida, ene new registered office address; zent (Florida street address) ress: (City)	, Florida(Zip Code)
D. If ame new re	nding the registered agent and/or the land of New Registered Agent and/or Agent Registered Agent Registered Agent Registered Office Addrostered Agent's Signature	ont and/or registered office address in Florida, ene new registered office address; zent (Florida street address) ress: (City)	, Florida, Cip Code) The obligations of the position.
D. If ame new re	nding the registered agent and/or the land of New Registered Agent and/or Agent Registered Agent Registered Agent Registered Office Addrostered Agent's Signature	ont and/or registered office address in Florida, ence new registered office address; zent (Florida street address) ress: (City) if changing Registered Agent; registered agent. I am familiar with and accept the	, Florida, Cip Code) The obligations of the position.

(((H15000170742 3)))

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	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	TD	Joseph C. Lynn	673 Yelvington Road
Add			East Palatka, FL 32131
X Remove			
2)Change			1
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	-		
Remove			
2201100 70			
6) Change			
Add			
Remove			

From:	Divis	Kennedy	

Fax: (866) 695-0896

To: 8506176380@rcfax.con Fax: +18506176380

Page 4 of 5 07/13/2015 5:16 PM

(((H15000170742 3)))

Mach addition	adding additional Ar al sheets, if necessary)	(Be specific)				
		, . 				
· · · · · · · · · · · · · · · · · · ·		·				
						
	#####################################					
						
·						
	,					
· · · · · · · · · · · · · · · · · · ·						
 -			 		·	-
						
f an amendme	nt provides for an ex	change, reclassifics	ation, or capcella	tion of issued sha	ires.	
orovisions for (if not app	implementing the an dicable, indicate N/A)	nendment if not con	itained in the am	endment itself:		
·						
						
		 				
						_
				-		

			·
From: Dixie Kennedy	Fax: (866) 695-0896	To: 8508176380@rcfax.com Fax: +18506176380	Page 5 of 5 07/13/2015 5:16 PM
		(((H15000170742 3)))	
) adoption:	if other than the
date this d	locument was signed.		
Effective	date if applicable:	July 13, 2015	
		(no more than 90 days after amendm	ent file date)
		is block does not meet the applicable statutory filing Department of State's records.	requirements, this date will not be listed as the
Adoption	of Amendment(s)	(CHECK ONE)	
		adopted by the shareholders. The number of votes case sufficient for approval.	rt for the amendment(s)
		approved by the shareholders through voting groups. for each voting group entitled to vote separately on the	
		ast for the amendment(s) was/were sufficient for appro-	oval
t	ру	(voting group)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		(voting group)	
☐ The ar		adopted by the board of directors without shareholder	action and shareholder
	mendment(s) was/were was not required.	adopted by the incorporators without shareholder action	on and shareholder
	Dated Jul	y 13, 2016	
		8	
	Signature Z	W No -	
	(By	a director, president or giner piticer - if directors or o	fficers have not been
		ected, by an incorporator – if in the hands of a receiver	trustee, or other court
	арр	ointed fiduciary by that fiduciary)	
		Karen S. Lynn	•
•		(Typed or printed name of person signi	ng)
		President	
		(Title of person signing)	