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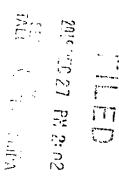
| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: John A. Kasbar & | Company, Inc. | | | | |
|---|---|--|---|--|--|--|
| DOCUMENT NUM | | | | | | |
| | The enclosed Articles of Amendment and fee are submitted for filing. | | | | | |
| Please return all correspondence concerning this matter to the following: | | | | | | |
| | Claudia Moncarz | | | | | |
| | Name of Contact Person | | | | | |
| | Moncarz Law Firm Pl | | | | | |
| | | Firm/ Company | | | | |
| | 1116 South Vista Ave, Ste. 123 | | | | | |
| | Address | | | | | |
| | Boise, Idaho 83705 | | | | | |
| | | City/ State and Zip Cod | e | | | |
| clau | dia@claudiamoncarz.com | | | | | |
| | | sed for future annual report | notification) | | | |
| For further information | on concerning this matter, pleas | se call: | · , | | | |
| Claudia Moncarz | | 786 | de & Daytime Telephone Number | | | |
| Name | of Contact Person | Area Co | de & Daytime Telephone Number | | | |
| Enclosed is a check for | 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) | | | |
| Am Div P.C | illing Address endment Section rision of Corporations b. Box 6327 lahassee, FL 32314 | Amend Divisio Clifton 2661 E | Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301 | | | |

Articles of Amendment to Articles of Incorporation of

| John A. Nasoar & Company, Inc. | |
|--|-----------------------|
| (Name of Corporation as currently filed with the Florida Dept. of State) | |
| S39709 | |
| (Document Number of Corporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following a its Articles of Incorporation: | amendment(s) to |
| A. If amending name, enter the new name of the corporation: | |
| | |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abb | he new |
| mame must be distinguishable and contain the word "corporation," company, or incorporated or the abo- "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." | revianon ntain the |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | _ |
| | |
| <u> </u> | 2 |
| | 7.7% 7.7% |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 7 |
| | ·] |
| |) ; |
| | |
| | is desired |
| 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: | つ !'3 |
| | |
| Name of New Registered Agent | |
| <u> </u> | |
| (Florida street address) | |
| New Registered Office Address:, Florida, | |
| (City) (Zip Cod | de) |
| | |
| | |
| 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. | |
| i nevely accept the appointment as registered agent. Tam jumittar with and accept the ootigations 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 Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | | | |
| Add | | | |
| Remove | | | |
| 2) Change | | | |
| Add | · · · · · · | | |
| Remove | | v. | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | ************************************** |
| Remove | | | |
| | | | |
| 5) Change | | - | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) |
|--|
| "Article III - CAPITAL STOCK: |
| The authorized capital stock of this corporation shall be two hundred (200) shares of common stock at no par |
| value. For the purposes of this incorporation, said stock shall be valued at FIVE AND NO/100 (\$5.00) DOLLARS. |
| The common stock shall be payable in cash, property or services, at a just valuation to be fixed by the Board of Directions |
| at a regular or special meeting called for that purpose. Property, labor, services may be purchase and paid for with the |
| common stock of the corporation at a just value to be fixed by the Board of Directors." |
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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 N/A) n/a |
| |
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| |

| The date of each amendment(s) adoption:date this document was signed. | , if other than the |
|---|--------------------------|
| 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 w document's effective date on the Department of State's records. | ill not be listed as the |
| 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. | |
| Dated 12-8-16 | |
| Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) | _ |
| JOHN A. HABBAR | |
| (Typed or printed name of person signing) | · . |
| Arasident | |
| (Title of person signing) | |