5717/8

((Requestor's Name)				
((Address)				
((Address)				
((City/State/Zip/Phone #)				
PICK-UP	WAIT MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies	Čertificates of Status				
	•				

Special instructions to Filing Officer:
Lawrence Dutton gave
Verbal permission to
correct the adoption
method on page 4.
T.C. 9/24

Office Use Only



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15 SEP 23 PH 1: 57

SECRETARY OF STATE

THE CELVED

2015 SEP 23 PH 4: 15

SEPRETARY OF STATE

SEP 24 2015 T CANNON CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee. Fig. 32301

Tallhassee, FL 32301 Phone: 850-558-1500

Filone: 650-556-1500						
ACCOUNT NO. : 12000000195						
REFERENCE : 795495 8065688						
AUTHORIZATION: Spulsblend						
COST LIMIT : \$35.00						
ORDER DATE : September 23, 2015						
ORDER TIME : 3:25 PM						
ORDER NO. : 795495-005						
CUSTOMER NO: 8065688						
DOMESTIC AMENDMENT FILING						
NAME: BEACON ACCOUNTING SERVICES INC.						
EFFECTIVE DATE:						
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING						

EXAMINER'S INITIALS:

CONTACT PERSON: Courtney Williams -- EXT# 62935

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BEACON ACCOUNTING Services In:						
DOCUMENT NUMBER: 571718						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Lawrence J. Duttow Name of Contact Person						
Beacon Accounting Services it.c.						
3135 Sw MAPP Rd						
Palm City, FL 34990 City/State and Zip Code						
E-mail address: (to be used for future annual report notification)						
E-mail address. (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Lawrence J. Dutton at 772 455-4510 Name of Contact Person Area Code & Daytime Telephone Numl e						
Name of Contact Person Area Code & Daytime Telephone Numl e						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status (Additional Copy is enclosed)						
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address Amendment Section Division of Corporations Division of Corporations Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301						

Articles of Amendment to

Articles of Incorporation of

Beacon (accounting Serv	ices Inc	
Œ	ame of Corporation as currently	filed with the Florida Dept. of State	
	571718		. <u></u>
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of sections Articles of Incorporation:	n 607.1006, Florida Statutes, this J	Florida Profit Corporation adopts the fo	l) swing amendment(s) t
. If amonding name, enter the r	ew name of the corporation:		
		NA	The new
name musi be distingutshable an "Corp.," "Inc.," or Co.," or the word "chartered," "professional a	designation "Corp," "Inc," or "C	n," "company," or "incorporated" or Co". A professional corporation name P.A."	t le abbreviation in ust contain the
•		N/A	
B. <u>Enter new principal office ad</u> Principal office address <u>MUST B</u>	tress, if applicable: EASTREET ADDRESS)		
C. <u>Enter new mailing address, i</u> (Mailing address <u>MAY BE A I</u>		NA	15 SEP 2
D. If amending the registered ag new registered agent and/or t	eut and/or registered office addr he new registered office address:	ess in Florida, enter the name of the	3 (A) PP 11
Name of New Registered .	Igeni	VH	57
	(Florida stre	eet address)	
New Registered Office Ad	dress:	Cinul , Florida_	('In Code)
New Registered Agent's Signatul	e, if changing Registered Agent:	Florida (City) with and accept the obligations of the po	(tip Code)
		_	
	Simumon of Name P	evistared Agout if changing	_

If amending the Officers and/or Directors, enter the title and name of each officer/director being remov x and title, name, and address of each Officer and/or Director being added:

(Anach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

 $P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman o \cdot Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the <math>j > t$ 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 Joh 1 Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT John D	oc		
X Remove	V Mike J	ones		
X Add	SV Sally S	<u>mith</u>		
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
l) Change	TSD	Lowrence J. Dutton	3135 : N Mapp Rd	1
Add			Palm City FL 34990	
Remove				
2) Change				
Add				
Remove				
3) Change				
Add			SEP CRE	
Remove			- 23 (SS)	77
4) Change				
Add			I: 57	! •
Remove				ŀ
5) Change				
Add				
Ramove				
6) Change				
Add				
Remove				

The date of each amendment(s) adoption: 991 2015 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 in document's effective date on the Department of State's records.	I not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
The amundment(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	
☐ 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 9/23/15 POA	Rizzyti
(By a director, president of 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)	- 1 - 1 L L V 1 1
Lawrence J Duthn (Typed or printed name of person signing)	SECT TALL.
(Title of person signing)	CRETARY LUNE OR SEP 23
(1 tue of person signing)	
	STATE 7.ORID 1:57