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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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T. LEMIEUX

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: lan Johnso	n Inc.	····
DOCUMENT NUM	BER: <u>P0400009698</u>	8	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	lan Johnson		
		Name of Contact Person	n
	lan Johnson Inc.		
		Firm/ Company	
	5235 Pinetree Ro	1.	
		Address	
	Panama City, FL	32404	
	***************************************	City/ State and Zip Cod	e
ian	johnsonstone@gr	nail com	
		sed for future annual report	notification)
	2 422. 333. (v. 33 w.		,
For further informatio	n concerning this matter, pleas	se call:	
lan Johnson		at (850	, 9606512
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Cliftor	Address Iment Section on of Corporations Building Executive Center Circle
		Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

lan Johnson Inc.			
(Name of Corporation as currently filed with the Flo	orida Dept. of State)		
P04000096988			
(Document Number of Corporation (if	known)	•	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	<i>lorida Profit Corporation</i> ado	pts the following	amendment(s) to
A. If amending name, enter the new name of the corporation:			
		7	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cword "chartered," "professional association," or the abbreviation "I	Co". A professional corporate		
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			

D. If amounting the registered agent and/or registered office address.	ore in Florido, enter the norm	of the	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	53 in Florida, enter the name	e or me	
Name of New Registered Agent			
(Florida stre	et address)		
New Registered Office Address:	, Florida		
(City)		(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations	of the position	,
		CRE	П
Signature of New Registered A	gent, if changing	JUN I	p===
		8 P.	LED
		<u> </u>	
		15 15 15 15 15 15 15 15 15 15 15 15 15 1	

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	VP	Roberts, Christopher	3011 W. 21st Ct. Panama City, FL 32405
2) Change Add Remove	<u>vp</u>	Johnson, Martin	1900 Foster Ave. Panama City, FL 32405
3) Change Add Remove	,		
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Artical (attach additional sheets, if necessary).	(Be specific)
·	· · · · · · · · · · · · · · · · · · ·

If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares.
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ving his 10 shares to Martin Johnson.
inistopher Roberts is give	ving his to shares to Martin Johnson.

·	440
W	

The date of each amendment	(s) adoption: 6/11/2012
Effective date <u>if applicable</u> :	6/11/2012
enecuve date <u>it applicable</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated 6/1	1/2012
Signature	
se	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court popointed fiduciary by that fiduciary)
	lan Johnson
	(Typed or printed name of person signing)
	President
	(Title of person signing)