

P 100019478

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : MOYLE, FLANIGAN, KATZ, RAYMOND, WHITE & KRASNER
Account Number : I20060000039
Phone : (561) 659-7500
Fax Number : (561) 659-1789

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 JUN 18 PM 2:42

FILED

RECEIVED
2009 JUN 18 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AMND/RESTATE/CORRECT OR O/D RESIGN

EQUINE ENTERPRISES OF PALM BEACH, INC.

Certificate of Status	0
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No. 4748 P. 3

COVER LETTER

((H09000141857 3))

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Equine Enterprises of Palm Beach, Inc.

DOCUMENT NUMBER: P01000012478

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Paul A. Krasker
Name of Contact Person

Moyle, Flanigan, Katz, et al.
Firm/ Company

625 N. Flagler Drive, 9th Floor
Address

West Palm Beach, Florida 33401
City/ State and Zip Code

pkrasker@moylelaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul A. Krasker at (561) 822-0330
Name of Contact Person Area Code & 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)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

((H09000141857 3))

Articles of Amendment
to
Articles of Incorporation
of

((H09000141857 3))

Equine Enterprises of Palm Beach, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P01000012478

(Document Number of Corporation (if known))

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "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 ADDRESS**)*

C. Enter new mailing address, if applicable:

*(Mailing address **MAY BE A POST OFFICE BOX**)*

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:

Name of New Registered Agent:

New Registered Office Address:

(Florida street 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 with and accept the obligations 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
VP	Dale W. Frick	2017 Appaloosa Trail Wellington, Florida 33414	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

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)

The date of each amendment(s) adoption: 6-5-09
(date of adoption is required)

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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 6/16/09

Signature Patricia Vaccaro
(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)

PATRICIA VACCARO
(Typed or printed name of person signing)

President
(Title of person signing)