

From: 954 563 2153
Division of Corporations

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P0100007781

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H12000001553 3)))



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

From: Account Name : ROYALE MANAGEMENT SERVICES, INC.
Account Number : 075136002300
Phone : (954)563-1269
Fax Number : (954)563-2153

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

Email Address: _____

12 JAN - 4 PM 2:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
BLOSSER & SAYFIE, P.A.**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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Amend/Re

Electronic Filing Menu Corporate Filing Menu Help

AK 1-4-70



January 4, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

BLOSSER & SAYFIE, P.A.
450 E LAS OLAS BLVD STE 1500
FT LAUDERDALE, FL 33301

SUBJECT: BLOSSER & SAYFIE, P.A.
REF: P01000077814

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

FAX Aud. #: H12000001553
Letter Number: 412A00000107

RECEIVED

12 JAN -4 AM 8: 23

TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

H12000001553 3

Articles of Amendment
to
Articles of Incorporation
of

FILED
12 JAN -4 PM 2:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BLOSSER & SAYFIE, P.A.

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

P01000077814

(Document Number of Corporation (if known))

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:

SAYFIE LAW FIRM PA

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**)

450 E LAS OLAS BLVD #1500

FORT LAUDERDALE, FL 33301

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

450 E LAS OLAS BLVD #1500

FORT LAUDERDALE, FL 33301

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)

(City)

Florida

(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

H12000001553 3

H1200000 1553 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)

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------|----------------|---|
| _____ | _____ | _____ | <input 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)

H1200000 1553 3

H12 00000 1553 3

The date of each amendment(s) adoption: DECEMBER 18, 2011

Effective date if applicable: JANUARY 1, 2012
(date of adoption is required)
(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):*

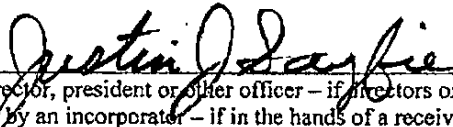
"The number of votes cast for the amendment(s) was/were sufficient for approval

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 DECEMBER 23, 2011

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)

JUSTIN SAYFIE
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)

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