

P04000005563

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

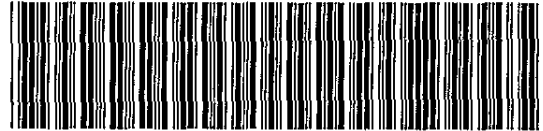
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/20/04--01011--007 **35.00

FILED

04 JAN 20 09 11:22

201 JAN 16 09 11:22

MC
T. Lewis 1/20/.

January 15, 2004

Thelma Lewis
Amendment Section
Division of Corporations
Po box 6327
Tallahassee, FL 32314

Dear Ms. Lewis:

SUBJECT: "LEITNER FINANCIAL SERVICES INC" NAME CHANGE TO "SON SHINE
FINANCIAL SERVICES"

I spoke with you this morning regarding the amendment that I mailed yesterday without the \$35.00 fee. I am mailing the fee to your attention as you requested. I am also enclosing a copy of the documents that were mailed.

Thank you very much for your help. If you need any more information please call me at 561-502-9226.

Sincerely,

A handwritten signature in cursive script, appearing to read "Charles D. Leitner".

Charles D Leitner

Enclosures (4)

PO BOX 221971
WEST PALM BEACH, FL 33422-1971

January 14, 2004

AMENDMENT SECTION
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE, FL 32314

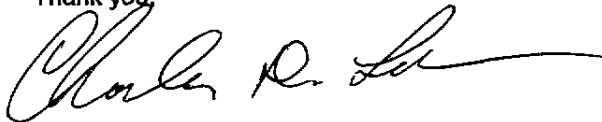
Dear Sir or Madam:

**Subject: "LEITNER FINANCIAL SERVICES INC" NAME CHANGE TO "SON SHINE
FINANCIAL SERVICES INC"**

We are currently incorporated under the name of "Leitner Financial Services Inc." according to document number P04000005563. Please amend this name to read "Son Shine Financial Services Inc."

If you need any further information please call me at 561-502-9226.

Thank you

A handwritten signature in black ink, appearing to read "Charles D. Leitner", with a long horizontal flourish extending to the right.

Charles D Leitner
President
Leitner Financial Services Inc.

Articles of Amendment
to
Articles of Incorporation
of

LEITNER FINANCIAL SERVICES INC.

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

P04000005563

(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:

NEW CORPORATE NAME (if changing):

SON SHINE FINANCIAL SERVICES INC.

(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

N/A

(Attach additional pages if necessary)

If an amendment provides for 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

(continued)

FILED
04 JAN 20 AM 11:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The date of each amendment(s) adoption: JANUARY 14, 2004

Effective date if applicable: N/A
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☐ The amendment(s) was/were approved 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
N/A"
(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.

Signed this 14 TH day of JANUARY, 2004.

Signature Charles D. Leitner
(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)

CHARLES DAVID LEITNER
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)

FILING FEE: \$35