P0500006531

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: OUNDER APRILLE DUNDONC - Manual Company No MISSINGE NO MISSINGE

Office Use Only



6000641535 16

FILED
SECRETARY OF STATE
ALLAHASSEE, FLORIDA
1/23/06--01055

North March

COVER LETTER

TO: Amcdidment Section
Division of Corporations

		` ~	ė			
NAME OF CORPORATION:	Julie	D. Bruno, Inc	• • • • • • • • • • • • • • • • • • •			
DOCUMENT NUMBER:	P050	00065317				
The enclosed Articles of Amendme	nt and fee are s	submitted for filing.				
Please return all correspondence co	ncerning this m	natter to the following:				
		D. Brano	.			
	(Name of C	ontact Person)				
	(Firm/	Company)				
	100 5 (Ad	SW 15th ave,	Uni + 6			
·····	Fort Law (City/ State	derdale, FL 33 and Zip Code)	331 <u>a</u>			
For further information concerning	this matter, ple	ase call:				
Julie D. Bru (Name of Contact Person)	<u>no</u>	at (95 4) 8 / 5 (Area Code & Daytime	7 3472 e Telephone Number)			
Enclosed is a check for the following	ng amount:					
\$35 Filing Fee S43.75 Filing Certificate of		\$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



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 25, 2006

JULIE D. BRUNO 1005 SW 15TH AVENUE, UNIT 6 FORT LAUDERDALE, FL 33312

SUBJECT: JULIE D. BRUNO, INC. Ref. Number: P05000065317

We have received your document for JULIE D. BRUNO, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

When changing the name of a corporation filed pursuant to chapter 607, Florida Statutes, to that of a professional service corporation filed pursuant to chapter 621, Florida Statutes, the nature of business must also be added or changed to specifically indicate what type of professional service the corporation will be rendering.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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) 245-6880.

Karen Gibson Document Specialist

Letter Number: 506A00005449

Articles of Amendment to Articles of Incorporation

			Arucies	01 1HC	orporai	HOII			
				of					- \$5 G
			Julie	7	Ru.	m 7	TO C		FE
Vol. d. sub		(Mama of one	rporation as curre		····			<u> </u>	- 2 2
		(Name of cor	iporation as curre	muy me	a with the	e Fiorida I	Dept. of State	,	252
			2						867
			P0500	000	653	リチ			5,4
			(Document numb)		200
									72.2
			tion 607.1006,				Florida Pro	fit Corpe	oration 🕏
adopts the	e following a	ımendment	(s) to its Articl	les of I	ncorpor	ation:			
NEW CO	DRPORATI	<u>e name (i</u>	if changing):						
	1.1:	- N '	Bruno	D	⊿				
(Must cont	oin the word "a	omorption " !	"company," or "in	, ,	todii oz ik	a abbassis	tion IICom II	UI-a flas	11C= 11\
(A professi	onal corporation	orporation, in must contai	in the word "char	tered". '	brofessio	nal associ	ation." or the	abbreviati	on "P.A.")
				,	F		,		
AMEND	MENTS AL	OPTED-	(OTHER TH	AN NA	ME CI	HANGE) Indicate A	Article N	umber(s)
			nded, added or						()
		_					<u></u>		
	مهد در کنیشر	بشريج ببه	The pup	205C	of.	this	busine	:5S	
,									
is di	ssemina	fe ps	ychologic cofession	al	SCYU	rices	to the	Como	runt-11
, ,		/ /	,	,			,	-	1
at (arge,	MY Dr	ofission	be.	ng	Clini	cal Psy	1cholo	94
	U	7 '					, ,	(10
	·						·		
									
									
 		· · · · · · · · · · · · · · · · · · ·					· ············		
			N=1-11 /						
			(Attach additi	onal pag	es if nec	essarv)			**************************************
			(2 22-22-22 2000000	onar pag	,00 11 1100	••••• _•			
If an ame	ndment prov	ides for exc	change, reclass	sification	on, or ca	ancellatio	on of issued	l shares.	provisions
for imple	menting the a	amendment	if not contain	ed in th	ne amen	dment it	self: (if not a	pplicable.	indicate N/A
•	.						(** **************************	T. L marak	
	~	$\mathcal{N}/$	A						
			-						

(continued)

The date of each amendment(s) adoption: <u>01-20-2006</u>
Effective date if applicable: 0/-20-2006 (no more than 90 days after amendment file date)
(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
(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.
Signature Julie D. Sumo
(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)
Tulie D. Bruno (Typed or printed name of person signing)
(Typed or printed name of person signing)
Director (Title of person signing)
(Title of person signing)

FILING FEE: \$35