

PD6000005720

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

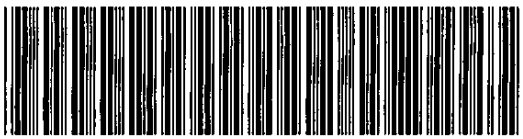
(Business Entity Name)

(Document Number)

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11/17/06--01024--003 **70.00

NY/Amend

FILED
2006 NOV 30 PM 1:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts NOV 30 2006



COPY

FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 21, 2006

BRIAN D OFFICER
CYPRESS FINANCIALS INC
1300 S. LAKE HOWARD DR. SUITE 404
WINTER HAVEN, FL 33880

SUBJECT: KEY CONTACT CALL CENTER, INC.
Ref. Number: P06000005720

We have received your document for KEY CONTACT CALL CENTER, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is #P02000126653.

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
Document Specialist

Letter Number: 906A00067754

RECEIVED
NOV 30 8:00 AM '06
DIVISION OF CORPORATIONS

COVER LETTER

**TO: Amendment Section
Division of Corporations**

NAME OF CORPORATION: Key Contact Call Center Inc

DOCUMENT NUMBER: P06000005720

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

Please return all correspondence concerning this matter to the following:

Brian D. Officer

(Name of Contact Person)

The Officer Group Inc

(Firm/ Company)

1300 S. Lake Howard Dr. Suite #404

(Address)

Winter Haven, FL 33880

(City/ State and Zip Code)

For further information concerning this matter, please call:

Brian D. Officer President

(Name of Contact Person)

at (407) 454-3330

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$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

The date of each amendment(s) adoption: 01Nov06

Effective date if applicable: 01Nov06
(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 Brian D. Officer
(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)

Brian D. Officer
(Typed or printed name of person signing)

President
(Title of person signing)

FILING FEE: \$35