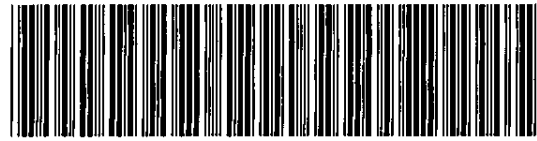


P060000 11743



200123485772

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

02/11/08--90001--014 **60.00

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

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08 APR 10 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NSC
4/21

Stanford & Sons Trucking Corp.

2121 W. Oakland Park Blvd, Suite 7
Oakland Park, FL 33311
954 485-9041 : 954 485-9043 Fax

April 4, 2008

Amendment Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Subject: Abinan, Inc. (P06000011743) name change to Abi-Ashnan, Inc.

Dear Sir/Madam,

On February 4, 2008, I mailed a fictitious name change form along with check # 3160 in the amount of \$60.00

I apologize but I meant to file an amendment to the company name.

Enclosed is the amendment form. Please deduct the fees for the following from the \$60 you currently have on check # 3160: \$35 filing fee, \$8.75 Certified copy, \$8.75 Certificate of Status, totaling \$52.50

Please refund the balance of \$7.50 to the payee:

Stanford & Sons Trucking Corp.
2121 W. Oakland Park Blvd, Suite 7
Oakland Park, FL 33311

Thanks for you attention to this matter.

Sincerely,



Stanford Amritt

President

SECRETARY OF STATE
TALLAHASSEE, FL

RECEIVED

2008 APR 10

COVER LETTER

TO: Amendment Section
Division of Corporations

Abinan,
NAME OF CORPORATION: Abi-Ashnan, Inc.

DOCUMENT NUMBER: PO6000011743

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

Please return all correspondence concerning this matter to the following:

Stanford Amritt
(Name of Contact Person)

Abi-Ashnan, Inc.
(Firm/ Company)

4828 NW 20 Place
(Address)

Coconut Creek FL 33063
(City/ State and Zip Code)

For further information concerning this matter, please call:

Stanford Amritt at (954) 485-9041
(Name of Contact Person) (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: 5/4/08

Effective date if applicable: _____
(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 Stanford Amritt
(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)

Stanford Amritt
(Typed or printed name of person signing)

President
(Title of person signing)

FILING FEE: \$35