

PO6000092936

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

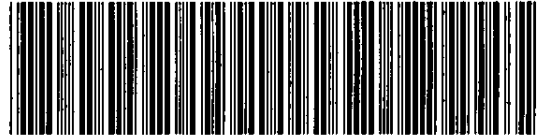
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 MAY - 8 PM 2:53

FILED

*Amend
Taxes
5-8-09*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FDC Property Solutions, Inc.

DOCUMENT NUMBER: P06000092936

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

Please return all correspondence concerning this matter to the following:

Denise Tschida
Name of Contact Person

FDC Property Solutions, Inc.
Firm/ Company

P.O. Box 151
Address

Palmetto FL 34220
City/ State and Zip Code

FDC Solutions@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Denise Tschida at (941) 487-2770
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- \$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

Articles of Incorporation
of

FDC Property Solutions Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

FILED

09 MAY -8 PM 2:53

906000092936

(Document Number of Corporation (if known))

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

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**)

604 South Pinellas Avenue
Tarpon Springs, FL
34689

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

P.O. Box 151
Palmetto, FL 34220

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:

A to Z Discount Liquors & More
604 South Pinellas Avenue

New Registered Office Address:

(Florida street address)
Tarpon Springs, Florida 34689
(City) (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.

Denise Tschida
Signature of New Registered Agent, if changing

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>
V.P.	FRANK J. Tschida	304-10 th Ave. E. Palmetto FL 34221	<input type="checkbox"/> Add <input checked="" 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)

Article III (Amended to read as follows):
The purpose for which this corporation
is organized is: Retail Store Management
and any and all lawful business purpose.

**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)

Shares are issued with authority of the
original incorporator and initial sole officer,
Denise Tschida allowing a transfer of the 49%
interest of the shares issued to Frank J. Tschida,
going back to Denise Tschida. Therefore, this change
will have all issued shares 100%
held by Denise Tschida.

Effective date if applicable: _____
(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 all shareholders.”
(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 4-30-2009

Signature Denise Tschida
(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)

DENISE Tschida
(Typed or printed name of person signing)

President
(Title of person signing)