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NC News 11-26-08

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: TRI-H INVESTMENTS, INC.			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and	fee are submitted for filing.		
Please return all correspondence concerning	ng this matter to the following:		
	SHADI SHOMAR		
4)	Iame of Contact Person)		
SHOM	IAR ACCOUNTING, PA		
	(Firm/ Company)		
	7777 NW 146th ST.		
	(Address)		
	MI LAKES, FL 33016 ity/ State and Zip Code)		
For further information concerning this ma			
SHADI SHOMAR	at ( <u>305</u> ) <u>825-1123</u>		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amou	unt made payable to the Florida Department of State:		
☑ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 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 Amendment Articles of Incorporation**



	ESTMENTS, INC.	state) ASEE, FLANE
(Name of Corporation as current	ntly filed with the Florida Dept. of S	state)
(Document Numb	ber of Corporation (if known)	
Pursuant to the provisions of section 607.1006 following amendment(s) to its Articles of Incorp		it Corporation adopts th
A. If amending name, enter the new name of	the corporation:	
TRI-H CONSULTING, INC.		
The new name must be distinguishable an "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name association," or the abbreviation "P.A."	"Inc.," or Co.," or the designation	"Corp," "Inc," or
B. <u>Enter new principal office address, if appli</u> (Principal office address <u>MUST BE A STREET</u>	icable:  TADDRESS )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u>—————————————————————————————————————</u>	
D. If amending the registered agent and/or renew registered agent and/or the new regist		nter the name of the
Name of New Registered Agent:		<del></del>
New Registered Office Address:	(Florida street address)	<del></del>
_	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered		ent the obligations of th
nosition		-r oc., o oj

Signature of New Registered Agent, if changing

## If amending the Officers and/or Directors, enter the title and name of each officer/director being 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>	Address	Type of Action
			Add Remove
			D Damassa
			□ Damaua
	ing or adding additional Articles, ent ditional sheets, if necessary). (Be spe		
provisio	endment provides for an exchange, responsible to the same of the same of applicable, indicate N/A)		

The date of each amendmen	nt(s) adoption: <u>10/16/08</u>
Effective date if applicable:	•
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval
by	
•	(voting group)
The amendment(s) was/w action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/w action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_lO_	16/08
Signature _ (B	y a director, president or other officer - if directors or officers have not been
se	pointed fiduciary by that fiduciary)
	DOUGLAS S, HOY
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)