

**P09000093237**

Division of Corporations

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Florida Department of State  
Division of Corporations  
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(((H10000075138 3)))



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To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : CORPDIRECT AGENTS, INC.  
Account Number : 110450000714  
Phone : (850) 222-1173  
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*RA3200.122762*

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
PROFIT REVENUE OPTIMIZATION MG INC.**

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TALLAHASSEE, FLORIDA  
10 APR - 2 AM 8:58  
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*Amerio & N.C.*

**C. COULLETTE**

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Help

APR 09 2010

To: The Florida Dept. of State  
Subject RA3200.122762

From: Ashley Smith

Thursday, April 08, 2010 9:29 AM Page: 1 of 5

**PLEASE GIVE ORIGINAL SUBMISSION  
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**PLEASE GIVE ORIGINAL SUBMISSION  
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April 2, 2010

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

PROFIT REVENUE OPTIMIZATION MG INC.  
1521 ALTON ROAD  
SUITE 321  
MIAMI BEACH, FL 33139US

SUBJECT: PROFIT REVENUE OPTIMIZATION MG INC.  
REF: P09000093237

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

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Cheryl Coulliette  
Regulatory Specialist II

FAX Aud. #: H10000075138  
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P.O BOX 6327 - Tallahassee, Florida 32314

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Articles of Amendment  
to  
Articles of Incorporation  
of

Profit Revenue Optimization MG, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P09000093237

(Document Number of Corporation (if known))

FILED  
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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:**

Profit Revenue Optimization, Inc.

*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:**

1521 Alton Road, Suite 321

(Principal office address **MUST BE A STREET ADDRESS**)

Miami Beach, FL 33139

**C. Enter new mailing address, if applicable:**

1521 Alton Road, Suite 321

(Mailing address **MAY BE A POST OFFICE BOX**)

Miami Beach, FL 33139

**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:

Thomas J. Abrahamsen, Jr

New Registered Office Address:

1521 Alton Road, Suite 321

(Florida street address)

Miami Beach

(City)

Florida 33139

(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.*

Signature of New Registered Agent, if changing

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**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>	<u>Address</u>	<u>Type of Action</u>
<u>DPST</u>	<u>Thomas J. Abrahamsen Jr</u>	<u>1525 Alton Road, Suite 321</u> <u>Miami Beach, FL 33139</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>DPST</u>	<u>RS Schmitt</u>	<u>407 Lincoln Road PH-SE</u> <u>Miami Beach, FL 33139</u>	<input type="checkbox"/> Add <input checked="" 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)*

The Surviving Corporation, Profit Revenue Optimization, Inc, shall remain the Managing  
Member of Profit Revenue Optimization LLC.

**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)*

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The date of each amendment(s) adoption: January 15, 2010

Effective date if applicable: \_\_\_\_\_  
*(no more than 90 days after amendment adoption)*

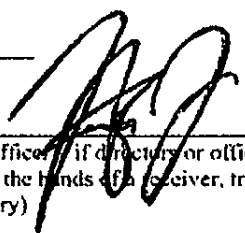
Adoption of Amendment(s) **(CHECK ONE)**

- The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment 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.

Dated April 1, 2010

Signature \_\_\_\_\_  
*(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)*



Thomas J. Abrahamsen Jr.  
*(Typed or printed name of person signing)*

President  
*(Title of person signing)*

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