P110008856X

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ві	usiness Entity Nan	ne)
(Dx	poument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



800212289218

10/17/11--01055--010 **43.75

SECRETARY OF STATE

MIIOCT I7 AMIL:5

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	Team Tax, I	nc
DOCUMENT N	UMBER:	P1100008	8564
The enclosed Arti	cles of Amendment and fee a	re submitted for filing.	
Please return all c	orrespondence concerning th	s matter to the following:	
		ebra A Heyer EA	
)	ame of Contact Person	
		Team Tax Inc	
		Firm/ Company	
	856	Pines Blvd Ste 214	
		Address	100 A A A A A A A A A A A A A A A A A A
	D	L B' 5100004	
		roke Pines FI 33024 ry/ State and Zip Code	
		y/ State and Zip Code	
_	heyer.de	obie@yahoo.com for future annual report notific	
	E-man address; (to be use	for future annual report notific	ation)
For further inform	ation concerning this matter,	olease call:	
D	ebra A Heyer EA	at (954)	881-6586
	of Contact Person	Area Code & Dayt	time Telephone Number
Enclosed is a chec	k for the following amount n	ade 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 encl	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address		Street Address	
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporation	ons
P.O. Box 6327		Clifton Building	
Tallahassee FL 32314		2661 Executive Cente	r Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Tea	am Tax Inc		THE PERSON TO
(Name of Corporation as curre	ently filed with the Florid	a Dept. of State)	到二下
P11	000088564		SSE -
(Document Num	nber of Corporation (if kno	wn)	1981年
Pursuant to the provisions of section 607.1000 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this F	lorida Profit Corporati	ion adopts the following
A. If amending name, enter the new name of	f the corporation:		
			The new
name must be distinguishable and contain t abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	designation "Corp," "Inc	c," or "Co". A profess	sional corporation
B. Enter new principal office address, if app	licable:		
(Principal office address <u>MUST BE A STREE</u>	T ADDRESS)		
		<u> </u>	-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)			
D. If amending the registered agent and/or r		n Florida, enter the na	me of the
new registered agent and/or the new regis	stered office address:		
Name of New Registered Agent:			
New Registered Office Address:	(Florida street a	nddress)	
		, Florida	2
•	(City)	(Zip Code)	
T	5		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agent in the comment as registered agent in the comment as registered agent in the comment in the comment is a second in the comment in the comment in the comment is a second in the comment in the comment is a second in the comment in the comment is a second in the comment in the comment is a second in the comment in the comment is a second in the comment in the comment is a second in the comment in the comment is a second in the comment in the comment is a second in the comment in the comment is a second in the comment in the comment is a second in the comment in the comment is a second in the comment in the comment is a second in the comment in the comment is a second in the comment in the comment is a second in the comment in the comment is a second in the comment in the comment is a second in the comment in the comment is a second in the comment in the comment is a second in the comment in the comment is a second in the comment in the comment in the comment is a second in the comment in the		nd accept the obligation	ns of the position.
S	ignature of New Registered	d 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
	<u>P</u>	Debra A Heyer	8621 SW 15th St Pembroke Pines FI 33025	
	_			□ Add □ Remove
	_			
		g or adding additional Articles, en tional sheets, if necessary). (Be sp		
	rovisions		reclassification, or cancellation of i	

The date of each amendmen	t(s) adoption: October 14, 2011
Effective date <u>if applicable</u> :	October 14, 2011 October 14, 2011
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
The amendment(s) was/we must be separately provide	ere approved by the shareholders through voting groups. The following statement ed 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)
	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_Octo	bber 14 2011
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Debra A Heyer
	(Typed or printed name of person signing)
	President President
	(Title of person signing)