P99000018425

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e#)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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SECRETARY OF STATE
SECRETARY OF STATE

MEND - 1/9

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT:	ending of o	blicers and st	anes
DOCUMENT NUMBI	ER: P99000019	8425	
The enclosed Articles o	f Amendment and fee are	submitted for filing.	
Please return all corresp	ondence concerning this n	natter to the following:	
	acqueline S. (Name	Peter of Person)	
Floric	da Janage La Name of F	LINGSCAPINS, JUIC	.
1894	Anderson Lau	OL_ idress)	
LYAB,	FL 33-10p (City/State)	and Zip Code)	<u></u>
	concerning this matter, ple		
bequeline s	S - Reviger	_at (<u>501</u>) <u>905</u> - (Area Code & Daytime T	
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 of Corp	tion	Street Address Amendment Section Division of Corporations	

409 E. Gaines Street

Tallahassee, FL 32399

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The date of each amendment(s) adoption: 7/9/04
Effective date if applicable:
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.
Signed this 9th day of July , 2004.
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)
Colin Tester (Typed or printed name of person signing)
OKKICER - NIOW (Title of person signing)

FILING FEE: \$35