## P98000077768

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Amend

SECRETARY OF STATE DIVISION OF CORPORATIONS
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

Badge Express, Inc. NAME OF CORPORATION: P98000077768 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Scott Alan Orth, Esq. Name of Contact Person Law Offices of Scott Alan Orth, P.A. Firm/ Company 3880 Sheridan Street Address Hollywood, Florida 33021 City/ State and Zip Code scott@orthlawoffice.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Scott Alan Orth, Esq.  $at \, (\frac{305}{\text{Area Code \& Daytime Telephone Number}} \,$ Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



## Badge Express, Inc.

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

(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florid ts Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following ame	endment(s
A. If amending name, enter the new name of the c	orporation:	
n/a	The	new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	rd "corporation," "company," or "incorporated" or the abbrev o," "Inc," or "Co". A professional corporation name must conta- abbreviation "P.A."	iation in the
B. Enter new principal office address, if applicable Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	n/a	
If amending the registered agent and/or registered new registered agent and/or the new registered	red office address in Florida, enter the name of the office address:	
Name of New Registered Agent n/a		
	(Florida street address)	
New Registered Office Address:	(City) , Florida (Zip Code)	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered agent	gistered Agent:  I am familiar with and accept the obligations of the position.	
norto, accept the appointment as registered agent.	A am jamiliar with and decept the configurous of the position.	
Signature of N	ew 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)

Please note the officer/director title by the first letter of the office title:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. \ If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	•
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>P</u>	Robert Newman	5763 N. Andrews Way
Add X Remove			Ft. Lauderdale, Florida 33309
2) X Change	P/S	George Szemkus	5763 N. Andrews Way
Add			Ft. Lauderdale, Florida 33309
Remove			
3) Change	<del></del>		
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<del></del>		
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	icles, enter change(s) here:
n/a	(be specifie)
11/a	
<u> </u>	
	hand the state of
nrovisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
n/a	

10/20/2012 The date of each amendment(s) adoption: 10/20/2012 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 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. Signature ---(By 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) George Szemkus (Typed or printed name of person signing) President/Secretary

(Title of person signing)