611157

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
0 11 1 1 5 5 5 6		
Special Instructions to Filing Officer:		

Office Use Only



800160446638

09/11/09--01022--006 **35.00

Muns

DIVISION OF CORPORATIONS

09 SEP 11 PM 2: 02

य सिर्वाध्यक SEP 1 5 2009

COVER LETTER

TO:	Amendment Section
	Division of Corporations

		·	
NAME OF COR	PORATION: 7-W-7	Hide-a-L	vay, Irc
DOCUMENT N	UMBER: 6 111	57	
The enclosed Arti	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning this	s matter to the following:	
	Jacqueline (Name o	DUNGSTR of Contact Person)	AND
7	-N-T Hide-	a-way TNC m/Company)	<u> </u>
<u>. (</u>	6527 COAS	TAL HWY, (Address)	·
	CRAW FORD (City/SI	ville FL attack and Zip Code)	32327
For further inform	ation concerning this matter,	please call:	
Jacquelin	we CUNGSTRA A	u) at (850) 92	5-6412
(Nan	ne of Contact Person)	(Area Code & Daytin	ne Telephone Number)
Enclosed is a chec	k 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		Street Address	

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 Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: **NEW CORPORATE NAME (if changing):** (Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.") AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) ARTICLE 4- By a UNANIOUS VOTE Shareholders and BOARD OF DIRECTORS of the Corporation have the authority to increase the total number of Shares from 500 to 740 at of \$ 1.00. Article 5- The address of the mitial registered Office is changed to 6527 COASTAL HWY. CRAWFORDVILLE FL 32327. If an amendment provides for 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)

The date of each amendment(s) adoption: 08/11/2009
Effective date if applicable: 08/11/2009 (no more than 90 days after amendment file date)
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.
Signature (By a dijector, 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) [Typed or printed name of person signing)
REASURER

FILING FEE: \$35

(Title of person signing)