672870

(Re	equestor's Name)	
(Ac	dress)	
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EXAMINER

TIVISION OF CORPORATIONS

10 APR 30 PM 3 49

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	JN: MAINI-U	J SERVICES, INC.	
DOCUMENT NUMBER:	672870		10 APR 30 PM 345
The enclosed Articles of Am	endment and fee are s	ubmitted for filing.	80
Please return all corresponde	ence concerning this m	atter to the following:	· · · · · · · · · · · · · · · · · · ·
	Sue Butl	er of Contact Person	
		Services, Inc.	
		rm/ Company	
	11635 NV	l 1st Avenue Address	
	Gainesvi	lle, FL 32607	
	City/ S	State and Zip Code	
E-n	suebutle nail address: (to be used for	er@jotar.com Tuture annual report notification)	,
For further information conc	erning this matter, plea	ase call:	
Sue Butler Name of Contact	Person	at (352) 332-08 Area Code & Daytime Tel	
Enclosed is a check for the f	ollowing amount made	payable to the Florida Depart	tment of State:
	75 Filing Fee & ificate 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 Division of Corporat P.O. Box 6327 Tallahassee, FL 3231		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl Tallahassee, FL 32301	e

Articles of Amendment **Articles of Incorporation** of



	AINT-CO SERVICES, IN ently filed with the Florida	
		Dept. of State)
	72870 nber of Corporation (if knov	<u></u> wn)
suant to the provisions of section 607.100 and ment(s) to its Articles of Incorporation:	• ,	·
If amending name, enter the new name of	f the corporation:	
		The new
ne must be distinguishable and contain reviation "Corp.," "Inc.," or Co.," or the new must contain the word "chartered," "pro	designation "Corp," "Inc	," or "Co". A professional corporation
Enter new principal office address, if app		
ncipal office address <u>MUST BE A STREE</u>	ST ADDRESS)	
	E	AD-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
Enter new mailing address, if applicable		
(Mailing address <u>MAY BE A POST OFFI</u>	CE BOX)	
If amending the registered agent and/or r		n Florida, enter the name of the
new registered agent and/or the new regi		n Florida, enter the name of the
		n Florida, enter the name of the
new registered agent and/or the new reginer in Name of New Registered Agent:	stered office address:	· · · · · · · · · · · · · · · · · · ·
new registered agent and/or the new regi		· · · · · · · · · · · · · · · · · · ·
new registered agent and/or the new reginer in Name of New Registered Agent:	stered office address:	· · · · · · · · · · · · · · · · · · ·

Signature of New 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
PD	John M Curtis	11635 NW 1st Avenue Gainesville, FL 32607	
VTD	Gail Curtis	11635 NW 1st Avenue Gainesville, FL 32607	
<u>SD</u>	Tashia C Hale	11635 NW 1st Avenue Gainesville, FL 32607	
(attach d	additional sheets, if necessary).	(Be specific)	
provis		schange, reclassification, or cancellation of tendment if not contained in the amendmen	

The date of each amendment(s) adoption: April 26, 2010
	(date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statemen for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval
by	,
. · ·	(voting group)
The amendment(s) was have action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated Apri	30, 2010
Signature(By	a director, president or other officer - if directors or officers have not been
selec	ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Gail W. Curtis
	(Typed or printed name of person signing)
	President/Secretary/Treasurer
	(Title of person signing)

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>	Name	<u>Address</u>	Type of Action
PST	Gail W. Curtis	11635 NW 1st Avenue Gainesville, FL 32607	X Add
VP	Tashia C. Hale	11635 NW 1st Avenue Gainesville, FL 32607	X Add