F10000002892

| (Requestor's Name) | | | | |
|-------------------------|---------------------|--------------|--|--|
| | | | | |
| (Address) | | | | |
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| (Address) | | | | |
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| (Cit | y/State/Zip/Phon | a #1 | | |
| (011 | yrotaterzipit tioni | ο π <i>)</i> | | |
| PICK-UP | MAIT | MAIL | | |
| | | | | |
| (Business Entity Name) | | | | |
| | | | | |
| (Do | cument Number) | <u> </u> | | |
| | · | , | | |
| Certified Copies | _ Certificate: | e of Statue | | |
| Certified Copies | _ Certificates | S OF Status | | |
| | | | | |
| Special Instructions to | Filing Officer: | | | |
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Office Use Only



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SECRETARY OF STATE ALLAHASSEE, FLORID!

Amend

JUL 2 2 2010

COVER LETTER

| TO: | Amendment Section Division of Corporations | | |
|--------|---|---------------------------------|---|
| SUBJ | IECT: | The Lobree Co | |
| | *************************************** | Name of Corpo | ration |
| DOC | UMENT NUMBER: | MENT NUMBER: F10000002892 | |
| The es | nclosed <i>Affidavit by Foreign</i> itted for filing. | Corporation to Change | Add Officer(s) and/or Director(s) and fee are |
| Please | e return all correspondence co | oncerning this matter to | the following: |
| | H. Baird Lobree, I Name of Contact F | | |
| | The Lobree Cor Firm/Compa | | _ |
| | 2121 Ponce de Leon B Address | • | (Memo: This is the correct address for The Lobree Corporation Due to a scrivenor's error an incorrect address was shown on the Application to Transact Rushings in Florida Filed |
| | Coral Gables, Fl City/State and Zi | | error an incorrect address was shown on the Application to Transact Business in Florida filed on June 23, 2010 in Tallahassee, Florida Marola S. Lobre, Secretary HAMOLD 3. LOBREE |
| | hslobree@ E-mail address: (to be used for f urther information concerning | uture annual report notific | ation) |
| Hard | old S. Lobree, Secretary a Name of Contact Person | nd Treas, at (305 Area Code |) 665-4385 & Daytime Telephone Number |
| Enclo | osed is a check made payable | to the Florida Departme | nt of State for the following amount: |
| [| \$35.00 Filing Fee \$43.75 I Certific | (Add | \$52.50 Filing Fee, Certificate of Status & Certified Copy (sed) \$60 Copy (Additional copy is enclosed) |
| | Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Amen Divisi Clifto | Address: dment Section on of Corporations n Building Executive Center Circle |

Tallahassee, FL 32301







AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) AND/OR DIRECTOR(S)

(Note: Applicable only during the first calendar year of qualification)

| 1. | | e name of the foreign corporation as it appears on the records of the Florida Department of State is: | | |
|-----------------------------|---|---|--|--|
| | The Lobre | e Corporation | | |
| 2. | This entity was authorized to transact business in Florida on June 23, 2010 and its Florida documer number isF10000002892 | | | |
| 3. | This corporation was formed under the laws of | Indiana | | |
| 4. | | | | |
| <u>T</u> : | itle: | Name and Address | | |
| President & Director | | H. Baird Lobree | | |
| | | 2121 Ponce de Leon Blvd., Suite 720 | | |
| | | Coral Gables, FL 33134 | | |
| Vice President & Director | | Melissa S. Lobree | | |
| | | 2121 Ponce de Leon Blvd., Suite 720 | | |
| | | Coral Gables, FL 33134 | | |
| Secretary/Treas. & Director | | Harold S. Lobree | | |
| | | 2121 Ponce de Leon Blvd., Suite 720 | | |
| | | Coral Gables, FL 33134 | | |
| | | | | |
| _ | | | | |
| | | | | |
| | (Attach additional pag | es if necessary) | | |
| / W | old S. Lobre | Secretary/Treas. & Director | | |

Signature of an officer or director Harold S. Lobree

Typed or printed name of person signing

Title of person signing

FILING FEE \$35

Make checks payable to Florida Department of State and Mail to: Division of Corporations PO Box 6327 Tallahassee, FL 32314