G48347

(Re	questor's Name)	
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(Cit	ry/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	<u>. </u>
Certified Copies	_ Certificates	s of Status
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SECRETARY OF STAT



December 19, 2012

KATHLEEN DAY KATHLEEN DAY & ASSOCIATES INC. 7355 SW 87TH AVE., SUITE 300 MIAMI, FL 33173 US

SUBJECT: KATHLEEN DAY & ASSOCIATES, INC.

Ref. Number: G48347

We have received your document for KATHLEEN DAY & ASSOCIATES, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

Page 4 is missing from the amendment document. Page 4 must be completed. Enclosed for your convenience is the missing page.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6820.

Letter Number: 512A00029963

Rebekah White Regulatory Specialist

www.sunbiz.org



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 19, 2012

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The Enrichment Group

Financial & Investment Strategies For A Lifetime

Amendment Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

December 17, 2012

Re: Name change amendment Kathleen Day & Associates to The Enrichment Group, Inc.

Dear Sirs or Madams,

I am the president and CEO of Enrichment Group, Inc (document P00000067959) and the president and CEO of Kathleen Day & Associates (document G48347). On 12/11/12, I efiled a voluntary dissolution for Enrichment Group, Inc. The confirmation is 400242655854.

This letter is to certify that I will not revoke the dissolution of Enrichment Group, Inc., and that I authorize the release of the name Enrichment Group, Inc. to the corporation Kathleen Day & Associates, Inc. The enclosed amendment requests the name change of Kathleen Day & Associates, Inc. to The Enrichment Group, Inc.

Please call me at (305-794-8569) if you need additional information from me to release this name. Thank you for your assistance.

Sincerely,

Kathleen Day President, CEO

Enrichment Group, Inc.

COVER LETTER

TO: Amendment Section Division of Corporations

	ATION: Kathleen	Day & Associ	ates, Inc.
DOCUMENT NUMB	ER: G48347		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this made	tter to the following:	
	Kathleen Day		
		Name of Contact Person	1
<u> </u>	Kathleen Day 8	& Associates,	Inc.
		Firm/ Company	
	7355 SW 87th	Ave., Suite 30	00
		Address	
Ţ	Miami, FL 3317	73	
		City/ State and Zip Cod	e
kat	hleen@theenri	chmentaroup.	com
		sed for future annual report	
For further information	concerning this matter, pleas	se call:	
Kathleen Da	ay	_{at (} 305	274-1600 de & Daytime Telephone Number
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment of State:
□ \$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)
	ing Address ndment Section		Address
	sion of Corporations		on of Corporations
	Box 6327		Building
	hassee, FL 32314		Executive Center Circle
		Tallah	assee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED 13 JAN 22 PM 4:47

Kathleen Day & Assoicates, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) G48347 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The Enrichment Group, Inc. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

(Florida street address)

(City)

Florida

(Zip Code)

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	PT John D	<u>oe</u>	
X Remove	V Mike_J	<u>ones</u>	
X Add	SV Sally S	<u>mith</u>	
Type of Action (Check One)	Title	Name	Address
1) X Change	PCEO	Kathleen Day	7355 SW 87th Ave.
Add	 		Suite 300
Remove			Miami, FL 33173
2) Change	VS	Bryan P. Day	7355 SW 87th Ave.
X Add			Suite 300
Remove			Miami, FL 33173
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Pamova			

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f an amendment pro provisions for imple (if not applicable	menting the ame	hange, reclassific endment if not co	ation, or cancella	ntion of issued sha nendment itself:	res,
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Page 191 191	
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Signature (By/ardirector/president/or/other/officer-if/directors of	officers have not been
selected, by an incorporator - if in the hands of a receiv	
appointed fiduciary by that fiduciary)	
Kartale-ea Day	5. A SPORTLERS
(Typed or printed name of person signature)	gning)
Daniel	
(Title of person signing)	