## 668635

(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:			
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Reque	estor's Name)	
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status			
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Addres	ss)	
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status			
PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Addre	ss)	
PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status			
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(City/Si	tate/Zip/Phone	e #)
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status			
(Document Number)  Certified Copies Certificates of Status	PICK-UP	WAIT	MAIL
(Document Number)  Certified Copies Certificates of Status			
(Document Number)  Certified Copies Certificates of Status	(Busine	ess Entity Nam	ne)
Certified Copies Certificates of Status	(Baome	255 Endly Han	10)
Certified Copies Certificates of Status			
	nusoa)	nent Number)	
	Ower to t		
Special Instructions to Filing Officer:	Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:			
	Special Instructions to Filin	g Officer:	

Office Use Only



500057650165

05 AUG -1 AMII: 32

U8/01/05--01058--006 \*\*35.00

Gh N.C.

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF COP	RPORATION: BRADY SE	ERVICES INC		eren (vikes)
DOCUMENT N	UMBER: <u>G68635</u>		<u> </u>	TENERS TO STREET
The enclosed Art	ticles of Amendment and fee a	re submitted for filing.		
Please return all	correspondence concerning thi	s matter to the following:		
	SARAH BRADY		<u> </u>	
	(Name o	of Contact Person)		
	BRADY SERVICES I	INC.		*
	(Fir	m/ Company)		
	3822 US Hwy 301	SE	<u> </u>	 
		(Address)		
	HAWTHORNE, FL 32	2640		か二年 美子
	(City/ St	ate/ and Zip Code)	·	•
For further inform	nation concerning this matter,	please call:		
SARAH BRAI		at ( <u>352</u> ) <u>481</u>		e Marie e profes
(Na	me of Contact Person)	(Area Code & Dayti	me Telephone Number)	
Enclosed is a che	eck for the following amount:			
⊠k\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing F. Certificate of St. Certified Copy (Additional Copilis enclosed)	tatus
	ailing Address	Street Address		
	mendment Section ivision of Corporations	Amendment Se Division of Cor		
	O. Box 6327	409 E. Gaines S		

Tallahassee, FL 32399

Articles of Amendment to Articles of Incorporation of	OS AUG-
BRADY GROUP ENTERPRISES, INC.	SSE -
(Name of corporation as cufrently filed with the Florida Dept. of State)  G68635	AHII: 32 E. FLORID
(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:

## 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.")	· <del>-</del> ·
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	ı
ARTICLE VI PRINCIPAL OFFICE is being amended to:	•
3822 SEUS HWY 301	
HAWTHORNE, FL 32640	
	The state of the s
	***
	e e propries de la companya de la co
	era en en en en en En en el en
(Attach additional pages if necessary)	· · · · · · · · · · · · · · · · · · ·
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provision for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N	
	- ** <u>**</u> - *

(continued)

The date	of each amendment(s) adoption: AUGUST 1, 2005 for all changes	-:
Effective	date if applicable:  (no more than 90 days after amendment file date)	
Adoption	of Amendment(s) (CHECK ONE)	
R	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.	
Signed thi	is 27th day of JULY , 2005	 +
	Signature Sud Bally	
	(By a 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)	
	SARAH BRADY	
	(Typed or printed name of person signing)	-
	PRESIDENT	
	(Title of person signing)	*

FILING FEE: \$35