## H10199

(Red	uestor's Name)	
(Add	lress)	
(Add	Iress)	· · · · · · · · · · · · · · · · · · ·
(City	/State/Zip/Phone	<del>= #)</del>
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



400215321104

12/19/11--01012--013 \*\*43.75



Amend Neuris 12-21-11

## **COVER LETTER**

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION:	A R CORPORATION
DOCUMENT NUMBER:	1/0/99
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning the	his matter to the following:
Amold (	Benstein
	Name of Contact Person
2	Firm/ Company
P-0, 602	20586
	Address
Sarvote,	Al 34276
arno/dat st	City/ State and Zip Code  City/ State and Zip Code  Compared to the Compared t
( 00	(
For further information concerning this matter	r places call:
To refuse internation concerning this matter	n, piease can.
Mold Senten	at(99/) $929$ $1$ $2$
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount	made payable to the Florida Department of State:
□ \$35 Filing Fee □ \$43.75 Filing Fee &	\$43.75 Filing Fee & \$52.50 Filing Fee
Certificate of Status	Certified Copy (Additional copy is enclosed)  Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

	Articles of Ar	mendment	FILED
	to Articles of Inc	orporation	TI DEC.
	of	•	TOEC 19 AM 10: 44
	76. COR	PORATION	TALLAHASSEE FLUIS
(Name of Corporation	as currently filed with	the Florida Dept. of State)	FLUNIDA
	H 10199		
(Docur	ment/Number of Corporat	tion (if known)	
Pursuant to the provisions of section amendment(s) to its Articles of Incorp		tes, this <i>Florida Profit Con</i>	poration adopts the following
A. If amending name, enter the new	v name of the corporatio	on:	
	•		The new
name must be distinguishable and abbreviation "Corp.," "Inc.," or Co. name must contain the word "chartered".  B. Enter new principal office address MUST BE A.	.," or the designation "C ed," "professional associo <mark>ss, if applicable:</mark>	orp," "Inc," or "Co". A	professional corporation
C. Enter new mailing address, if an (Mailing address MAY BE A POS		POBox De Smok, p	586 134276
D. If amending the registered agent			the name of the
new registered agent and/or the	new registered office add	<del></del>	
Name of New Registered Agen	$\underline{t}$ : $\underline{fM}$ .	12 Bernifein	
		38 Chuch.	Pt., detain
New Registered Office Address	10.4	ida street address)	Pt., Hotel
	Noh	on, f, 1	Florida Syd 7)
	(City)	(Zip Co	ode)
New Registered Agent's Signature, i			,
I hereby accept the appointment as reg	istered agent. I am fahli 2	War with and accept the obl	igations of the position.
	Simulation	Paristoned Association	
	Signature of New	Registered Agent, if changi	ng

## 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 addittonal sheets, if necessary)

14	Name OOA	Cost 4	Address 4635-1	Type of Action
	1 11	Roll	SUR 197 PT	75 3425/ 34276
<u>/\e/)</u>	/7m./a	Mailinz /	738 Chrch 1605+ 205 Nofonis, F	Add Remove
			- Seri-te, F	7. \$427€0 
		tional Articles, enter		
(attach ad	lditional sheets, if ne	cessary). (Be spec	ific)	
· · · · · · · · · · · · · · · · · · ·				
				, , , , , , , , , , , , , , , , , , ,
			* * *** ** * * *** ** * * * * * * * *	
				· · · · · · · · · · · · · · · · · · ·
F. If an am	and mont provides	fan an araban <i>a</i> a rac	lossification or conce	llation of issued shares
			classification, or cance not contained in the a	llation of issued shares, mendment itself:
provisio		g the amendment if		
provisio	ons for implementin	g the amendment if		
provisio	ons for implementin	g the amendment if		
provisio	ons for implementin	g the amendment if		
provisio	ons for implementin	g the amendment if		
provisio	ons for implementin	g the amendment if		
provisio	ons for implementin	g the amendment if		
provisio	ons for implementin	g the amendment if		

The date of each amendment(s) a	doption:
Effective date if applicable:	(date of adoption is/required)
	more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adby the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast i	for the amendment(s) was/were sufficient for approval
by(voti	ing group)
action was not required.  The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated	ector, 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 d fiduciary by that fiduciary)
	Amile Benstein
	(Typed or printed name of person signing)
	(Title of person signing)