J17767

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AR 2/9/12

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: A.D.I. SER	VICES,INC.	·
DOCUMENT NUMI	_{BER:} J17767		·
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this mat	tter to the following:	
	RAMIRO ONATE		
	A.D.I. SERVICES	Name of Contact Person	n
	71.5.11. OLIVIOLO	Firm/ Company	
	2757 ERNEST ST	• •	
		Address	_
	JACKSONVILLE,	FL. 32205	
		City/ State and Zip Cod	e
AD	IDENNIS5@AOL.	СОМ	
	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	e call:	
RAMIRO ON	ATE	at (904	, 384-5833
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	ayable to the Florida Depa	ortment 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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

A.D.I. SERVICES, INC

2012 FEB -6 PM 1: 29

(Name of Corporation a J17767	s currently filed with the l	Florida Dept. of State)	SECRETARY OF S	ORIDI
(Docume	nt Number of Corporation (if known)	, tij	
Pursuant to the provisions of section 607 ts Articles of Incorporation:	'.1006, Florida Statutes, this	Florida Profit Corpora	tion adopts the following	g amendment(s)
A. If amending name, enter the new n	ame of the corporation;			
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associd	nation "Corp," "Inc," or '	"Co". A professional o	ncorporated" or the ab	
B. Enter new principal office address,	if applicable:	A.D.I. SER\	ICES,INC.	
(Principal office address <u>MUST BE A STREET ADDRESS</u>) C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		2757 ERNE	ST ST.	
		JACKSONVI	LLE,FL. 32205	
		A.D.I. SERV	ICES,FL	
		2757 ERNE	ST ST.	
		JACKSONVI	LLE,FL. 32205	
). If amending the registered agent at			ne name of the	
new registered agent and/or the ne				
Name of New Registered Agent	RAMIRO ONAT	<u> </u>		
	2757 ERNEST	ST.		
	(Florida str	reet address)		
New Registered Office Address:	JACKSONVILLI	E .F	lorida 32205	
	(City)		(Zip Code)	
New Registered Agent's Signature, if c				
hereby accept the appointment as regist	tered agent. I am familiar s	with and accept the oblig	gations of the position.	,
Si	gnature of New Registered A	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)

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Pĭ	RAMIRO ONATE	RAMIRO ONATE
X Add Remove	*****		2757 ERNEST ST. JACKSONVILLE,FL.32205
2) X Change	V	DENNIS R. SHEARER	DENNIS R. SHEARER
Add Remove			2757 ERNEST ST. JACKSONVILLE,FL.32205
Change Add Remove	SEV	LINDA JOYCE SHEARER	LINDA JOYCE SHEARER 7415 TINTERN CIRCLE N. JACKSONVILLE,FL.32244
4) X Change Add Remove	vs	CHARLEEN L. SMITH	CHARLEEN L. SMITH 2757 ERNEST ST. JACKSONVILLE,FL. 32205
5) Change Add Remove		<u>.</u> .	
6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
CHANGE THE REGULAR MEETING OT THE SHAREHOLDER AND BOARD OF DIRECTORS TO JANUARY 6TH 3:00 PM EACH Y	EAR.
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
	

The date of each amendment(s) ac	doption: 2-1-12
Effective date <u>if applicable</u> : 2-'	1-1 <i>7</i>
Enterire date <u>n'appareable</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder
Dated 2-1-12	
	MIRO ONATE
selected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	RAMIRO ONATE
•	(Typed or printed name of person signing)
	PRESIDENT
•	(Title of person signing)