K81549

(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:

Office Use Only



800162690218

11/17/09--01033--022 **43.7S

SECURETARY OF STATE

N/C

NOV 23 2009

· Articles of Amendment to **Articles of Incorporation**

TOBONOVIT PM 1:32 CAMILLO, SNOWDEN & DE ALMEIDA, P.A. (Name of Corporation as currently filed with the Florida Dept. of State) K81549 (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following

	& SNOWDEN, P.A.	The
ame must be distinguishable and contain t bbreviation "Corp.," "Inc.," or Co.," or the ame must contain the word "chartered," "proj	designation "Corp," "Inc,"	or "Co". A professional corpo
Enter new principal office address, if appl		
Principal office address <u>MUST BE A STREE</u>	I ADDRESS)	
Enter new mailing address, if applicable:	,	
(Mailing address MAY BE A POST OFFIC	CE BOX)	
		lorida, enter the name of the
new registered agent and/or the new regis		lorida, enter the name of the
		lorida, enter the name of the
<u>Name of New Registered Agent:</u>	tered office address:	· · · · · · · · · · · · · · · · · · ·
new registered agent and/or the new regis		ress)
new registered agent and/or the new regis Name of New Registered Agent:	tered office address:	· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent: New Registered Office Address:	tered office address: (Florida street addi	ress), Florida
new registered agent and/or the new regis Name of New Registered Agent: New Registered Office Address: ew Registered Agent's Signature, if changing	tered office address: (Florida street addi (City) g Registered Agent:	ress) , Florida (Zip Code)
Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing the hereby accept the appointment as registered agent.	tered office address: (Florida street addi (City) g Registered Agent:	ress), Florida (Zip Code) accept the obligations of the pos

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)

Title Name Address **Type of Action** ☐ Add ☐ Remove ☐ Add ☐ Remove _ 🗌 Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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 amendmen	t(s) adoption: November 11, 2009
Effective date <u>if applicable</u> :	November 11, 2009
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
Signature (B) sel	y a director, president or other officer – if directors or officers have not been sected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) John M. Camillo
	(Typed or printed name of person signing)
	Director
	(Title of person signing)