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Amend

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SECRETARY OF STATE

1-2-911

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORI	PORATION:	J.C. POULIN	
DOCUMENT NUMBER:		L12892	*****
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning th	is matter to the following:	
		ev. Tommy Poulin	
	N	Name of Contact Person	
		Firm/ Company	
	59	931 Rhodes, Road	
		Address	
<del> </del>		Kent, OH 44240 City/ State and Zip Code	
	rev E-mail address: (to be use	rtp@live.com	<del></del>
For further informs	ation concerning this matter,	please call:	
Rev	v. Tommy Poulin	at ( 330 ) 5	77-7078
Name	of Contact Person	Area Code & Daytime Tel	ephone Number
Enclosed is a checl	k for the following amount n	nade payable to the Florida Depart	tment of State:
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	7 \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl	e

Tallahassee, FL 32301

## **Articles of Amendment** to Articles of Incorporation of

	of		F11 ==	
J.C.	POULIN	twr.	11 Alic	
(Name of Corporation as curren	tly filed with	the Florida I	11 AUG -8 PM 1	: 51
L	12892		TALLAHASSET OF STA	) 17c
(Document Numb	per of Corporat	ion (if known	TALLAHASSEE, FLOR	IDA
rsuant to the provisions of section 607.1006, endment(s) to its Articles of Incorporation:	, Florida Statu	tes, this <i>Flor</i>	rida Profit Corporation adopts the	e fol
If amending name, enter the new name of	the corporatio	n:		
			The	печ
previation "Corp.," "Inc.," or Co.," or the a ne must contain the word "chartered," "profe				ation
Enter new principal office address, if appli		5931 Rho	odes, Road	
incipal office address <u>MUST BE A STREET</u>	ADDKESS )	Kent, OH	1 44240	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC.	E BOX)			
If amending the registered agent and/or re			Florida, enter the name of the	
new registered agent and/or the new regist	ered office ad	<u>dress:</u>		
Name of New Registered Agent:				
New Registered Office Address:	(Flori	ida street add	dress)	
			, Florida (Zip Code)	
	(City)		(Zip Code)	
v Registered Agent's Signature, if changing	Registered A	gent:		
reby accept the appointment as registered ag			l accept the obligations of the posit	ion.
Sie	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: (Anach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	Address	Type of Action
_PST	Jean Camille Poulin	62 Robinson St. S Granby Granby QC J2G9L-1 CA	🖸 Remove
PST Per	Tommy Poulin	5931 Rhodes, Road Kent, OH 44240	☑ Add □ Remove
<del></del>			
	ing or adding additional Articles, of ditional sheets, if necessary). (Be		
	:		
provisio		e, reclassification, or cancellation of nt if not contained in the amendme	

The date of each amendmen	t(s) adoption: Jur	ne 27 2011
Effective date <u>if applicable</u> :	June 27 2011	(date of adoption is required)
enequive date <u>ii applicable</u> .		days after amendment file date)
Adoption of Amendment(s)	(СНЕ	ECK ONE)
The amendment(s) was/we by the shareholders was/w		shareholders. The number of votes cast for the amendment(s) pproval.
		shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amend	ment(s) was/were sufficient for approval
by		,,,
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the b	board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the i	incorporators without shareholder action and shareholder
Dated_June	e 27 2011	
Signature	h	uda Paulin
sele		ent or other officer – if directors or officers have not been orator – if in the hands of a receiver, trustee, or other court y that fiduciary)
		Linda Poulin
	(Туре	ed or printed name of person signing)
	(Title of	Executor/Administrator / Me presentative person signing)