L33206

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SECRETARY OF STATE TALLAHASSEE, FI ORIDA

NC

TB 1-29-09

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Impeccable Strategies, Inc
DOCUMENT NUMBER: L33206
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Barbara Faucett (Name of Contact Person)
(Name of Contact Person)
Creative Sesperation INC
4581 WESTON Rd # 306
(Address) (City/ State and Zip Code)
For further information concerning this matter, please call:
Berbara Fawert at (954) 655-0017 (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 \$\begin{array}{ c c c c c c c c c c c c c c c c c c c
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

	to	JAL X		
Aı	rticles of Incorporation	TALLAGET PO		
Induceable S	of Strategies, -	Luc AHASARY PA		
(Name of Corporation as currently filed with the Florida Dept. of State)				
L33206				
	Number of Corporation (if know	/n)		
Pursuant to the provisions of section 607.1 following amendment(s) to its Articles of Inc.		orida Profit Corporation adopts the		
A. If amending name, enter the new name Creative Desper The new name must be distinguishable				
The new name must be distinguishable "incorporated" or the abbreviation "Corp" "Co". A professional corporation nassociation," or the abbreviation "P.A."	o.," "Inc.," or Co.," or the d	lesignation "Corp," "Inc," or		
B. Enter new principal office address, if a (Principal office address MUST BE A STR				
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF		,		
D. If amending the registered agent and/o new registered agent and/or the new re		Florida enter the name of the		
Name of New Registered Agent:				
New Registered Office Address:	(Florida street ad	·		
	(City)	, Florida (Zip Code)		
New Registered Agent's Signature, if char I hereby accept the appointment as registe position.	nging Registered Agent: ered agent. I am familiar wi	M and accept the obligations of the		
_	Signature of New Registered	Agent, if changing		
	Page 1 of 3			

Articles of Amendment

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
		/	
		/	Remove
			☐ Add
			☐ Remove
	/.		
	/		
			
E Ifama	nding on adding additional Auticle		
	nding or adding additional Article additional sheets, if necessary). (
		/	
		·	
F. Ifana	mendment provides for an excha	nge, reclassification, or cancellat	ion of issued shares
<u>provis</u>	ions for implementing the amend	ment if not contained in the ame	ndment itself:
(If	not applicable, indicate N/A)		
	/		

The date of each amendment(s) ado	ption: 1-19-2009
Effective date if applicable:	- 10W -
	ore than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopt by the shareholders was/were suffi	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.
	oved by the shareholders through voting groups. The following statement ach 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	g group)
The amendment(s) was/were adopt action was not required.	ted by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopt action was not required.	ted by the incorporators without shareholder action and shareholder
Dated	9-2009 Duratt
Signature	2 Jawett
selected, by	tor, president or other officer – if directors or officers have not been y an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)
	Barbara Faucest
	(Typed or printed name of person signing)
	(Title of person signing)