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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

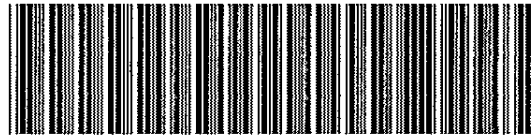
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend
C. Coullatte NOV 17 2006

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: KITNHEVN, INC

DOCUMENT NUMBER: EIN# 59-3639038

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CAROL FOGARTY
(Name of Contact Person)

KITNHEVN, INC
(Firm/ Company)

124 N NOVA RD # 135
(Address)

ORMOND BEACH FL 32174
(City/ State and Zip Code)

For further information concerning this matter, please call:

LISA JAMES at (904) 214-7827
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$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)

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 Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

KITNHEIN, INC

(Name of corporation as currently filed with the Florida Dept. of State)

EIN # 59-3639038

(Document number of corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

CHANGE IN OFFICERS AS INDICATED ATTACHED

2006 NOV 15 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

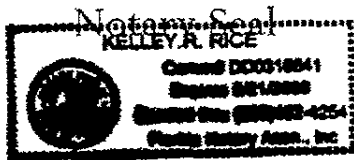
To Whom It May Concern:

Certificate of: KitnHevn, Inc. EIN# 59-3639038

I, Carol Fogarty, do hereby certify that I am the duly appointed and qualified Secretary and keeper of the records and corporate seal (if applicable) of KitnHevn, Inc., an organization/association organized and existing under the laws of the State of Florida, and that the following persons have been appointed or elected, have qualified, and are now acting as officers or employees of said organization/association in the capacity set before their respective names.

OFFICER	NAME (Please Print)
President	<u>LISA JAMES</u>
Vice President	<u>KELLEN RICE</u>
Treasurer	<u>CAROL FOGARTY</u>
Secretary	<u>CAROL FOGARTY</u>
Director	<u>ANNE ROTHEN BERGER</u>
Director	<u>LINDA KLORAN</u>

IN WITNESS WHEREOF, I have subscribed my name as Secretary.



[Signature]
Secretary's signature

10/15/06 Date

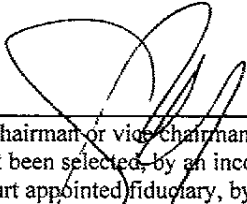
Approved by the following officers: Lisa K. James

The date of adoption of the amendment(s) was: 10/15/06

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signature 
(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

CAROL FOGARTY
(Typed or printed name of person signing)

SECRETARY / TREASURER
(Title of person signing)

FILING FEE: \$35