## N00000007882

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14 MAY -5 PH 2: 40 SECRETARY OF STATE TALL ARASSES FLORES

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C. LEVIS 14 2014

EXAPPINER

## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: COMPUTER ACQUICITION AND PLACEMENT PROGRAM, INC. N0000000788Z DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: GENE KING (Name of Contact Person) (Firm/ Company) 4655 NW 6877 BUD
(Address) LAKE PANASOFFKEE, FL (City/ State and Zip Code) CAPPINC ORG @ GMAIL. COM

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: GENE KING
(Name of Contact Person) at (813) 244-8704 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$\frac{1}{2}\$43.75 Filing Fee & Certificate of Status Certified Copy □\$52.50 Filing Fee Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** 

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

(Zip Code)

**Articles of Amendment** 14 MAY -5 PH 2: 40 Articles of Incorporation Acquisi Tion (Name of Corporation as currently filed with the Florida Dept. of State) N0000000788Z 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: A. If amending name, enter the new name of the corporation: REOPLE PERSONALLY, INC. ASSISTING name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

<del></del>	 (Florida street address)	<del></del>	
New Registered Office Address:			
		, Florida	

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

(City)

Signature of New Registered 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 X Remove X Add	PT V SV	John Do Mike Jo Sally Sn	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change Add		_		
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
_				
6) Change		_		
Add				
Remove				

If amending or adding add attach additional sheets, if i	necessary). (Be	specific)			
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The date of each amendment(s) adoption:	MAY	1,	2014	FIL	ED.	, if other than the
date this document was signed.				14 MAY -5	PM 2: 40	<b>—</b> ,
Effective date <u>if applicable</u> : (no	o more than 9	00 days a	fter amendm	ent file date ASS	<del>KON CORE</del> EE, BLORIDA	_
Adoption of Amendment(s)	CHECK ON	<u>E</u> )				
The amendment(s) was/were adopted by was/were sufficient for approval.	the members	and the	number of v	otes cast for the ar	nendment(s)	
There are no members or members entitl adopted by the board of directors.	ed to vote on	the ame	ndment(s).	The amendment(s)	was/were	
Dated MAY 1, 20	214					
	<del>/</del>				, <u> </u>	
(By the chairman or vi have not been selected other court appointed	d, by an inco	rporator	– if in the ha			
GENE	Kin6					
(Typed o	or printed nan	ne of per	son signing)		_	
PRESIOS	アクト					
	(Title of pe	rson sign	ning)		_	