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(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

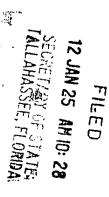
Office Use Only



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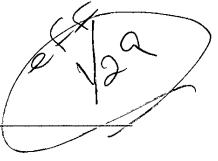
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: HUYY'CANZ H	Irmonizers, Inc.
DOCUMENT NUMBER: NO 10000565	74
The enclosed Articles of Amendment and fee are submitted for	filing.
Please return all correspondence concerning this matter to the fo	ollowing:
David Shutan (Name of	f Contact Person)
(Firm	n/ Company)
6913 Molakai Cir	Address)
Boynton Beach, Fl. 3:	3437 ate and Zip Code)
Porparamo E att.	
For further information concerning this matter, please call:	
David Shutan (Name of Contact Person)	at (<u>501</u>) <u>364</u> 9633 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the	he Florida Department of State:
\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Certificate of Status Certified Copy (Additienclosed)	Filing Fee & \$\sum_\$\$52.50 Filing Fee Certificate of Status ional copy is 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 **Articles of Incorporation** of



(Name of Corporation as currently filed with the Florida Dept. of State)	
(Name of Corporation as currently filed with the Florida Dept. of State)	
NOI 00005654	
(Document Number of Corporation (if known)	_
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the amendment(s) to its Articles of Incorporation:	following
A. If amending name, enter the new name of the corporation:	
Boca Raten Chapter, SPEBSQ54, Inc. name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Gorp."	_The new or "Inc."

Boca Raten Chapter, SPEBSQSA, Inc. name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Gorp."	_The new	
"Company" or "Co." may not be used in the name.	12 ,	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	JAN 25	77
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5 AMIO: 28	LED
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: Name of New Registered Agent:		

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

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

New Registered Office Address:

(City)

Signature of New Registered Agent, if changing

(Florida street address)

Florida

(Zip Code)

Page 1 of 4

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 <math>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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add Remove			
Remove			***************************************
2) Change Add	<u></u>		
Remove			
3) Change Add			
Remove			
4) Change			
Add Remove			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

The	date of each amendment(s) adoption: 1/23/12
Effe	ective date if applicable: 1/29/12
	(no more than 90 days after amendment file date)
Ado	option of Amendment(s) (CHECK ONE)
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
Ø	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	Dated 1/23/12- Signature David Mustan
	(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)
	David Shutan
	(Typed or printed name of person signing)
	Treysurer
	(Title of person signing)