## M04000001386

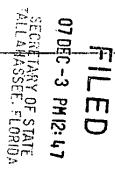
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL .
(Bu	siness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
		,

Office Use Only



200112566722

12/03/07--01012==020--\*\*35.00



000 3,07

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Project: Restoration, INC.		
DOCUMENT NUMBER: N0400000128		
DOCUMENT NUMBER.		
The enclosed Articles of Amendment and fee	are submitted for filing.	
Please return all correspondence concerning to	his matter to the following:	
Kathy Mardirosian		
(Name of	Contact Person)	
Project: Restoration, INC.		
(Firm	/ Company)	
1498 Stafford Ave.		
	Address)	
· ·	·	
Merritt Island, FL 32952	·	
(City/ Stat	te and Zip Code)	
For further information concerning this matter	r, please call:	
Kathy Mardirosian	at ( 321 ) 638-2343	
(Name of Contact Person)	a	
(Name of Confact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
\$35 Filing Fee \$Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certified Copy (Additional Copy is enclosed)	
Mailing Address	Street Address	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Articles of theor puration	1986	
of	20	97
Project: Restoration, INC.	EZ.	<u> </u>
(Name of corporation as currently filed with the Florida Dept. of State)	HASSE	-3 P
N0400001286	QF	PH 12: 4
(Document number of corporation (if known)	<u></u> S_	<u>ਲ</u> (
(Document number of corporation (if known)		-
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:	For Pro	fit
NEW CORPORATE NAME (if changing):		
(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or word language; "Company" or "Co." may not be used in the name of a not for profit corporation)	s of like i	mport in
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate A	rticle	
Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFI		
Article II: Principal Office- to be amended to read: 3702 Windsor Dr. Coc	oa FL,	32926
Article V- Delete the following Director: Cheryl Doxey, 283 Current Dr. Rockled	ige FL,	32955
Article V- Add the following Director: Vicki Stoughton, 1540 E Coral St. Merritt Is	land, FL	.32952
Article V: Amend address of Tom Robbins to read: 2455 N. Tropical Trail #34, Merritt Is	sland,FL	32953
	·····	
		<del></del>
		<del></del>
	<u></u>	
	<u> </u>	

(Attach additional pages if necessary) (continued)

The date of adoption of the amendment(s) was: 11-28-2007  Effective date if applicable: 11-29-2007  (no more than 90 days after amendment file date)				
			Adoption of Amendment(s)	(CHECK ONE)
			<del></del>	as (were) adopted by the members and the number of votes cast as sufficient for approval.
	s or members entitled to vote on the amendment. The erre) adopted by the board of directors.			
have not been select	vice chairman of the board, president or other officer- if directors cted, by an incorporator- if in the hands of a receiver, trustee, or ed fiduciary, by that fiduciary.)			
Kathy Mardiro	sian			
(Тур	ed or printed name of person signing)			
President				
	(Title of person signing)			

FILING FEE: \$35