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(Re	questor's Name)	_
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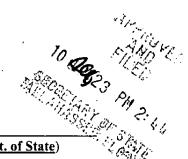


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SWEATMONE	KEY, INC.	
DOCUMENT NUM	BER: N07000001417		
The enclosed Articles	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this matt	ter to the following:	
		e M. Mariucci	
	(Name of	Contact Person)	
		MONKEY, INC.	
	(Firm	/ Company)	
	РО	Box 2100	
	(4	Address)	
	Lakelar	nd, FL 33806	
	(City/ Star	te and Zip Code)	The second secon
	Maggie@s E-mail address: (to be use	weatmonkey.org d for future annual report notific	eation)
For further information	on concerning this matter, please	e call:	
Maggie M. Mariud	cci	at (<u>863</u>) 698-899	90
(Name	of Contact Person)	(Area Code & Dayti	me Telephone Number)
Enclosed is a check f	or the following amount made p	ayable to the Florida Departmer	nt of State:
☑ \$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)
Amer Divis P.O.	ng Address adment Section ion of Corporations Box 6327 nassee, FL 32314	Street Address Amendment Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	er Circle

Articles of Amendment to Articles of Incorporation of



SWEATMONKEY, INC.

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

N07000001417

(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:

The new name must be distinguishable and abbreviation "Corp." or "Inc." <u>"Company"</u>			corporated" or the
B. Enter new principal office address, if app		116 S. Kentucky	Ave.
Principal office address <u>MUST BE A STRE</u>	<u>'ET ADDRESS</u>)	Lakeland, FL 338	01
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		PO Box 2100	
		Lakeland, FL 3380	06
new registered agent and/or the new re	<u>gisterea office aa</u>	aress:	
Name of New Registered Agent:	Magg	gie M. Mariucci	
Name of New Registered Agent:			
Name of New Registered Agent: New Registered Office Address:	116 S	jie M. Mariucci . Kentucky Ave.	_
	116 S (Flor	. Kentucky Ave.	— — , Florida 33801
	116 S (Flor	. Kentucky Ave. ida street address)	, Florida <u>33801</u> (Zip Code)
<u>New Registered Office Address:</u> ew Registered Agent's Signature, if change	116 S (Flor	. Kentucky Ave. ida street address) Lakeland (City)	
	116 S (Flor	. Kentucky Ave. ida street address) Lakeland (City)	

Page 1 of 3

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
			Add Remove
E. If amen	ding or adding additional Art	icles, enter change(s) here: (Be specific)	
			Hill divine
 ··			

The date of each amendment(s) ado	ption: 8/12/10
Effective date <u>if applicable</u> :	(date of adoption is required)
in applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adop was/were sufficient for approval.	ted by the members and the number of votes cast for the amendment(s)
There are no members or member adopted by the board of directors.	rs entitled to vote on the amendment(s). The amendment(s) was/were
have not be	airman or vice chairman of the board, president or other officer-if directors een selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)
	Macon Tomlinson
	(Typed or printed name of person signing)
	President, Board of Directors
	(Title of person signing)

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