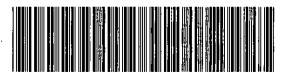
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(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
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2009 JUN 10 PH 12: 39
SECRETARY OF STATE

Amend TB 6/1409

ANGEL HEAR, INC.

Jo Ann B. Yanzuk Vice President 877-525-0075

June 8, 2009

Personal and Confidential

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Ms.Ramsey:

Per your conversation with Bob Bitters today, please find enclosed:

- 1) Cover Letter
- 2) Articles of Amendments Pages 1, 2, and 3
- 3) Check payable to Florida Dept. of State in the amount of \$52.50

The IRS, California, has requested a copy of the Articles of Amendments to Articles of Incorporation for Angel Hear, Inc. after your review. We are very concerned as the Response Due Date is June 18, 2009.

We ask, if at all possible, could you prioritize your review of this information?

Contact information:

Toll Free: 877-525-0075 Tel. No. 352-522-0075

Fax No. 352-522-0074 abell south net

We greatly appreciate your assistance. Thank you.

Most-sincerely.

Jo Ann Yanzuk

Attachments Cover Letter

Articles of Amendments - Pages 1,2, and 3

Check (described above)

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: Angel Hear, Inc.
DOCUMENT NUMBER: <u>NO80000 9001</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jo Ann Jan 20 K (Name of Contact Person)
Angel Hear, Inc
409 S. Main Street
Wild Wood, FL 34785 (City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: $807-525-0075$ OR
To Ann Vanzuk at 352, 522-0075 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & 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 Articles of Incorporation Of Articles of Incorporation Of Articles of Incorporation Of Articles of Incorporation Of Articles of Incorporation Of Articles of Incorporation Of Articles of Amendment Articles of Amendment Articles of Amendment Articles of Amendment To Articles of Incorporation Of Articles of Incorporation Of Articles of Incorporation Of Articles of Incorporation Of Articles of Incorporation Articles of Incorporation Of Articles of Incorporation Articles of Incorporation Of Articles of Incorporation Articles of				
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:				
A. If amending name, enter the new name of the corporation:				
The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may not B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		orporated" or the		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13551 St Dunnellor	J 103rd Street 1,FL 34432		
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 Office Address: (Flori	ida street address)	<u> </u>		
	(City)	, Florida (Zip Code)		
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I amposition.		pt the obligations of the		
Signature of New	Registered Agent, if cha	unging		

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>	Name	Address	Twpe of Action
irector	Robert F. Bitters	1064 Ceasars Cour	Add Remove
	**************************************	32757	_ ∏ Add _ ∏ Remove
			_ □ Add □ Remove
F Ifomend	ing or adding additional Articles, ente	ar change(c) hara	_
	ditional sheets, if necessary). (Be spec		
art	des of Group	oration	
arti	cle III Purposa	2	
Part	Soce. The Corpor	ation 1si MOA	rised
and	aperated exc	lusively of	120°
Char	stable, educe	topall, rell	gious,
M is	centific pur	pases with	N She
LONZ	ternall Penen	112 (A).	of the
 			
. ——————			

The date of each amendment(s) adoption:	Une 8,2009
•	(date of adoption is required)
Effective date <u>if applicable</u> : (no mo	ore than 90 days after amendment file date)
Adoption of Amendment(s) (CI	HECK ONE)
☐ The amendment(s) was/were adopted by the was/were sufficient for approval.	e members and the number of votes cast for the amendment(s)
There are no members or members entitled adopted by the board of directors.	I to vote on the amendment(s). The amendment(s) was/were
Dated June Signature	8,2009 n Wansel
(By the chairman or have not been select	r vice chairman of the board, president or other officer-if directors eted, by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)
Jo A	yped or printed name of person signing)
Vic	e President (Title of person signing)