0990100000000.

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



500207556615

05/13/11--01004--011 **35.00

11 MAY 13 PH 1:37



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Castle Consul	ting I Limited, Inc.	
DOCUMENT NUM	BER: N08000010990		
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corre	spondence concerning this matt	ter to the following:	
		ıl P. Gunning	
	(Name of	Contact Person)	
	Castle Cons	ulting I Limited, Inc.	<u>:-</u>
<u>-</u>	(Firm	/ Company)	
	14955 Gui	If Blvd., Suite #2	
	(/	Address)	
	Madeira B	seach, FL 33708	
		te and Zip Code)	
	drshomeser E-mail address: (to be use	vices@yahoo.com d for future annual report not	ification)
For further information	n concerning this matter, please	e call:	
Randal P. Gunnin	g	at (727) 458-2	2828
(Name	of Contact Person)	(Area Code & Da	aytime Telephone Number)
Enclosed is a check for	or the following amount made p	ayable to the Florida Departr	nent 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)
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 hassee, FL 32314	Street Address Amendment Section Division of Corpor Clifton Building 2661 Executive Corpor Tallahassee, FL 32	rations enter Circle

Articles of Amendment

to

Articles of Incorporation of

Castle Consul	tion Tlimite	d.Inc.
(Name of Corporation as curr	ently filed with the Florida Dept. of Sta	ate)
DORONO	10990	 /
(December Num	her of Compostion (if known)	
(Document Nur	mber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, the following amendment(s) to its Articles of In		rofit Corporation adopts
A. If amending name, enter the new name o	of the corporation:	
The new name must be distinguishable and cabbreviation "Corp." or "Inc." "Company" or		orporated" or the
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		
		
C. Enter new mailing address, if applicable		
(Mailing address MAY BE A POST OFFI	ICE BOX)	
D. If amending the registered agent and/or		
new registered agent and/or the new regi	istered office address:	
Name of New Registered Agent:		-
New Registered Office Address:	(Florida street address)	_
		. Florida
	(City)	(Zip Code)
N. Darista I America Circumstance (C. America)	Con Danish and America	
New Registered Agent's Signature, if changing I hereby accept the appointment as registere position.		pt the obligations of the
, L	Signature of New Registered Agent, if cha	inging

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)

Treas. Randal P. Gunning 14955 Gulf Blvd., Ste. #2	Remove Add
	Remove
	Add Remove
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	

The date of each amendment(s) a	•
Effective date if applicable:	(date of adbption is required) (no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad was/were sufficient for approval	dopted by the members and the number of votes cast for the amendment(s) l.
There are no members or members adopted by the board of directo	bers entitled to vote on the amendment(s). The amendment(s) was/were rs.
DatedSignature	chairman or vice chairman of the board, president or other officer-if directors
have no	t been selected, by an incorporator – if in the hands of a receiver, trustee, or urt appointed fiduciary by that fiduciary)
	Randal P. Gunning (Typed or printed name of person signing)
_1	Vice President/Secretary (Title of person signing)