N09000006135

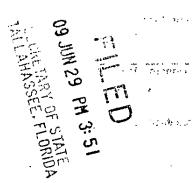
(Requestor's Name)
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Amend There's 1-1-09

COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION:	acker Management, INC.
DOCUMENT NUMBER: NC	9000006135
The enclosed Articles of Amendment a	and fee are submitted for filing.
Please return all correspondence concer	rning this matter to the following:
_ Jenni Bo	Name of Contact Person
	Name of Contact Person
Quarter	5, LLC Firm/Company
6996 Pia	220 Grande Ave., STP. 202 Address
Orzando.	FL 32835 City/ State and Zip Code
<u>Jenni. bake</u> E-mail address:	(to be used for future annual report notification)
For further information concerning this	matter, please call:
Jenni Baker Name of Contact Person	at (321) 293-0650 Area Code & Daytime Telephone Number
Enclosed is a check for the following a	mount made payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Fee Certificate of Sta	
Mailing Address	Street Address
Amendment Section Division of Corporations	Amendment Section 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

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TALLATAN te)	PA 3:51

Management, INC. (Name of Corporation as currently filed with the Florida Dept. of Stat URIDA (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name	
abbreviation "Corp.," "Inc.," or Co.," or	in the word "corporation," "company," or "incorporated" or the the designation "Corp," "Inc," or "Co". A professional corporation professional association," or the abbreviation "P.A."
B. Enter new principal office address, if a (Principal office address MUST BE A STR	
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF	
D. If amending the registered agent and/o new registered agent and/or the new re	or registered office address in Florida, enter the name of the registered office address:
Name of New Registered Agent:	Quarter 5, LIC
New Registered Office Address:	6996 Piazza Grande Ave. Ste. 207 (Florida street address)
	Orlando Florida 32835 (City) (Zip Code)
New Registered Agent's Signature, if chan I hereby accept the appointment as registere	nging Registered Agent: ed agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

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	Type of Action
D	Jennifer Baker	6996 Pigzza Grande Ave Ste. 202 Orlando, Fl 32835	Add Remove
<u>D</u>	Geraldine Roberts	6996 PIAZZA GIBANDE AUE 1+202 ORANDO FL 32636	Add Remove
			☐ Add ☐ Remove
provisions	ndment provides for an exchange, recla is for implementing the amendment if ne applicable, indicate N/A)		
			

The date of each amendment	(s) adoption: 6/85/09
	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	re approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	6-24-09.
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)
	(Time of berson signing)