100900011614

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SECKETARY OF STATE TALLAHASSEET FLORIEST



COVER LETTER

TO: Amendment Section **Division of Corporations**

Tallahassee, FL 32314

NAME OF CORPO	RATION: HARD N HEA	VY, INC	
DOCUMENT NUM	BER: <u>N09000011614</u>		
The enclosed Article	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
		NI SHINN	
	(Name of	f Contact Person)	
	COMMUNITY COM	NCEPTS SERVICES, INC	
	(Firm	n/ Company)	
	649 W. LIVII	NGSTON STREET	
		Address)	
	ODI ANDO	EL ODIDA 00040	
		, FLORIDA 32810 Ite and Zip Code)	
•	(0.0)	and 2.p coat)	
	riding4yo E-mail address: (to be use	uth@gmail.com of for future annual report notifica	tion)
For further informati	on concerning this matter, pleas	e call:	
(N.L.	of Country Develop	at ()	ne Telephone Number)
(Name	of Contact Person)	(Area Code & Daytiii	ie Telephone Number)
Enclosed is a check t	For the following amount made p	payable to the Florida Department	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)
Ame Divis	ing Address ndment Section sion of Corporations Box 6327	Street Address Amendment Section Division of Corporatio Clifton Building	•

2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 25, 2010

TONI SHINN 649 W LIVINGSTON ST ORLANDO, FL 32810

SUBJECT: HARD N HEAVY, INC. Ref. Number: N09000011614

copy see 1

We have received your document for HARD N HEAVY, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The last oage of your amendment is missing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 710A00013193



Articles of Amendment to Articles of Incorporation of

HARD	N HEAVY IN	NC.	-AEGGAN
(Name of Corporation as cu	rrently filed with	the Florida Dept. of State)	ACCEPT Y
NC	9000011614		THE SALL
	umber of Corporat	ion (if known)	— "SELO
Pursuant to the provisions of section 617.100 the following amendment(s) to its Articles of		, this <i>Florida Not For Profit C</i>	orporation adopts
A. If amending name, enter the new name	of the corporatio	<u>n:</u>	
CCSI MOTOF	RCYCLE MENT	ORING, INC.	
The new name must be distinguishable and abbreviation "Corp." or "Inc." "Company"			ted" or the
B. Enter new principal office address, if a		649 W LIVINGSTON ST	REET
(Principal office address MUST BE A STRI	EEI ADDKESS)	ORLANDO, FL 32801	_
C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF)		649 W LIVINGSTON STE	REET
		ORLANDO, FLORIDA 32	801
D. If amending the registered agent and/o new registered agent and/or the new re			name of the
Name of New Registered Agent:	Community C	oncepts Services, Inc.	
	649 W. LIV	INGSTON STREET	
New Registered Office Address:	(Flor	ida street address)	
	C	ORLANDO , Flo (City) (2	rida <mark>32801</mark> Zip Code)
New Registered Agent's Signature, if chan I hereby accept the appointment as register position.	ging Registered A red agent. I am	sgent: familiar with and accept the	obligations of the
_	Signature of New	Registered Agent, if changing	_

If amending the Officers and/or Directors, enter the title and name of each officer/director being semoved 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
	Community Concepts Services Inc	649 W. Livingstowe	✓ Add Remove
	Services Inc	32800	
			_
			_
			_
E. <u>If amer</u>	nding or adding additional Articles, ente	r change(s) here:	
(attach d	additional sheets, if necessary). (Be spec	ific)	
		· · · · · · · · · · · · · · · · · · ·	
			
<u></u>			
<u></u>			
,,,		-	

The date of each amendmen	t(s) adoption: 5/1/2010
• •	(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/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated Signature	5-19-2010
~ -	y the chairman or vice chairman of the board, president or other officer-if directors
hav	we not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	President (Title of person signing)
	CHUC OF DEISON SIGNING)