# 101000001602

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: BIZ BUZZ Con	nections Inc	
DOCUMENT NUMI	BER: N10000001602		
The enclosed Articles	of Amendment and fee are su	omitted for filing.	
Please return all corre	spondence concerning this man	tter to the following:	
- Marille or Specification		ey Ketchum	<del>-</del>
	(Name of	Contact Person)	
	Biz Buzz	Connections, Inc	_
	(Firm	n/ Company)	<del></del>
	3632 Land O	Lakes Blvd, Ste 101	
	(	Address)	<del></del>
	Land O.L	akes, FL 34639	
******		te and Zip Code)	*
		as@tampabay.rr.com	
	E-mail address: (to be use	ed for future annual report not	ification)
For further informatio	n concerning this matter, pleas	e call:	
Shelley Ketchum		at ( 813 ) 334-9	9493 ·
(Name	of Contact Person)		ytime Telephone Number)
Enclosed is a check fo	r the following amount made p	payable to the Florida Departn	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)
	ng Address	Street Address	,
	Iment Section	Amendment Section  Division of Corporation	
Division of Corporations P.O. Box 6327		Clifton Building	auous
	assee, FL 32314	2661 Executive Co	enter Circle

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

#### Biz Buzz Connections Inc

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

#### N10000001602

(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:

he new name must be distinguishable and	contain the word "corporation	" or "incorporated" or the
bbreviation "Corp." or "Inc." "Company"		
. Enter new principal office address, if a Principal office address <u>MUST BE A STRI</u>		
. Enter new mailing address, if applicable (Mailing address MAY BE A POST OF)		
. If amending the registered agent and/o	r registered office address in F	lorida, enter the name of the
. If amending the registered agent and/o new registered agent and/or the new re		lorida, enter the name of the
		Florida, enter the name of the
		lress)
new registered agent and/or the new re Name of New Registered Agent:	gistered office address:	

# 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>	Address	Type of Action
<u>VP</u>	Edna Dunston	3632 Land O Lakes Blvd Land O Lakes, FL 34639	☐ Add ☐ Remove
			Add Remove
E. If amendatach ad	ding or adding additional Article dditional sheets, if necessary). (1	es, enter change(s) here: Be specific)	M1 - M2 71 70
		· · · · · · · · · · · · · · · · · · ·	
			•
· · · · · · · · · · · · · · · · · · ·			

The date of each amendmen	t(s) adoption: 7/26/2010
Effective date <u>if applicable</u> :	(date of adoption is required) 7/26/2010
-	(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_8/9/	2010
Signature≻	Shellin Landal
(By	y the chairman of vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)
	Shelbie Landaker
	(Typed or printed name of person signing)
	Treasure
	(Title of person signing)