

N,00000007425

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

12 DEC 12 AM 10:59

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Amend
Theris

12-13-11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BluFairy, inc.

DOCUMENT NUMBER: NT0000007425

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dawn Veselka (Name of Contact Person)

BluFairy, inc. (Firm/ Company)

1439 Twin Rivers Blvd. (Address)

Oviedo, FL 32766 (City/ State and Zip Code)

blufairy@bluedelivered.com
blufairy@bluedelivered.com (to be used for future annual report notification)

For further information concerning this matter, please call:

Dawn Veselka (Name of Contact Person) at (407) 221-7720
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
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

FILED

BluFairy, inc.

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

11 DEC 12 AM 10: 59

NI0000007425

(Document Number of Corporation (if known))

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or " Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Dawn Veselka

1439 Twin Rivers Blvd.

(Florida street address)

New Registered Office Address:

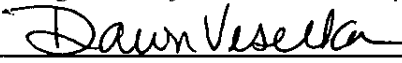
_____, Florida

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered 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, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

<u>Title(s)</u>	<u>Name</u>	<u>Address</u>
1)P_____	Dawn Veselka_____	1439 Twin Rivers Blvd Oviedo, FL 32765 _____ _____
2)VP_____	Courtney Barnette_____	3235 Clemwood Dr. Orlando, FL 32803 _____ _____
3)S_____	Laura Anthony_____	P.O. Box 277 Frankford, WV 24938 _____ _____
4)T_____	Diana Boyesen_____	2208 Catbriar Way Oviedo, FL 32765 _____ _____
5)_____	Jennifer Lect_____	2742 Fireside Ct Orlando, FL 32839 _____ _____
6)_____	_____	_____ _____ _____ _____

If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:

<u>Title(s)</u>	<u>Name</u>	<u>Title(s)</u>	<u>Name</u>
1)_____	_____	4)_____	_____
2)_____	_____	5)_____	_____
3)_____	_____	6)_____	_____

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

Article IX: The manner in which this corporation will be dissolved is: In accordance with Florida State Law.

Article X: The manner in which conflicts of interest will be resolved is: As provided by in the by-laws.

The date of each amendment(s) adoption: December 9, 2011

Effective date if applicable: December 9, 2011
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated December 9, 2011

Signature Dawn Veselka
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Dawn Veselka
(Typed or printed name of person signing)

President _____
(Title of person signing)