## N110000005466

(Requestor's Name)				
(Address)				
, ,				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Dusiness Elluty Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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Amend

NOV 1 4 2012 T. BROWN

## **COVER LETTER**

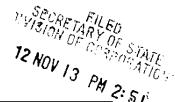
**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: NAKIN	1KA, INC.
DOCUMENT NUMBER: N110000	005466
The enclosed Articles of Amendment and fee a	re submitted for filing.
Please return all correspondence concerning thi	s matter to the following:
ZALMON O. SHERW	OOD
	(Name of Contact Person)
NAKIMKA, INC.	
	(Firm/ Company)
P.O. BOX 1342	
	(Address)
ARCADIA, FL 34265	
	(City/ State and Zip Code)
zalmon@centu	
E-mail address: (to b	be used for future annual report notification)
For further information concerning this matter,	please call:
JOHN F DOLANSKY (	PA PA at 941 488-9838
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount m	nade payable to the Florida Department of State:
\$35 Filing Fee \$\square\$	Fee & \$\sumsymbol{\Pi}\$
Mailing Address Amendment Section	Street Address Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation



NAKIMKA, INC.	Florida Dent. of State)
(Name of Corporation as currently filed with the F	Clorida Dept. of State)
N11000005466	
(Document Number of Corpo	oration (if known)
ursuant to the provisions of section 617.1006, Florida Statu nendment(s) to its Articles of Incorporation:	utes, this Florida Not For Profit Corporation adopts the fo
If amending name, enter the new name of the corpora	ation:
I/A	
ame must be distinguishable and contain the word "corpor	ration" or "incorporated" or the abbreviation "Corp." or
Company" or "Co," may not be used in the name.	
B. Enter new principal office address, if applicable:	N/A
Principal office address MUST BE A STREET ADDRESS	<u>(S</u> )
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
(muning dudiess MAT BE AT OST OFFICE BOA)	
If amending the registered agent and/or registered of new registered agent and/or the new registered office	
NI/A	• HEGI 555.
Name of New Registered Agent:	
lew Registered Office Address:	(Florida street address)
N/A	
	, Florida
(City	(Zip Code)
ew Registered Agent's Signature, if changing Registere	ed Agent:
hereby accept the appointment as registered agent. I am j	familiar with and accept the obligations of the position.
Signature of New Reg	gistered Agent, if changing

Page 1 of 4

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT John Do Y Mike Jo SV Sally Si	<u>ones</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove			
2) Change Add			
Remove 3) Change Add			
Remove 4) Change Add			
Remove  5) Change Add			
Remove  6) Change  Add	<del></del>	<del></del>	
Remove			

(attach additional sheets, if necessary). (Be specific)
ARTICLE VII:
SAID ORGANIZATION IS ORGANIZED EXCLUSIVELY FOR
CHARITABLE, RELIGIOUS, EDUCATIONAL, AND SCIENTIFIC
PURPOSES, INCLUDING, FOR SUCH PURPOSES, THE
MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT
QUALIFY AS EXEMPT ORGANIZATIONS UNDER SECTION
501(c)(3) OF THE INTERNAL REVENUE CODE, OR
CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX
CODE.

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

The date of each amendment(s) adoption: NOVEMBER 1, 2012
Effective date if applicable: NOVEMBER 1, 2012
(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 11-7-12 Signature Lalman O. Alexa 0-5
(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)
ZALMON O. SHERWOOD
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)