N1000008595

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9/14/12

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Restoration	n Station o	f Florida Inc.
DOCUMENT NUMBER: N110000085	595	
The enclosed Articles of Amendment and fee are submi	tted for filing.	,
Please return all correspondence concerning this matter	to the following:	
Philip R Berry		
()	Name of Contact Person)
Transformation Station of	Florida Inc).
	(Firm/ Company)	
3236 Beacon Square Driv	/e	
	(Address)	
Holiday, Florida 34691		
(0	City/ State and Zip Code)
prberryone@gmail		
E-mail address: (to be used for further information concerning this matter, please ca	•	otification)
Philip R Berry		947-4721
(Name of Contact Person)	at (<u>727</u>) <u>947-4721</u> (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount made paya	ible to the Florida Depar	tment 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallabasses, 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

FILED

2012 SEP 13 PM 3: 44 Restoration Station of Florida Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N11000008595 (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: A. If amending name, enter the new name of the corporation: Transformation Station of Florida Inc. 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: (Florida street address) New Registered Office Address: Florida (Zip Code) (City)

Signature of New Registered Agent, if changing

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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

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	<u>V</u> <u>Mi</u>	nn Doe ke Jones lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Joseph Nieves	665 Deer Run N
Add			Palm Harbor, Fl 34668
X Remove			*
2) Change	D	Carmen Nieves	665 Deer Run N
Add			Palm Harbor, FI 34668
X Remove			***
3) Change			•
Add			
Remove			
4) Change			
Add			•
Remove			
5) Change	*		
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
N/A			
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The date of each amendmen	t(s) adoption: U9/U1/ZU1Z	
Effective date <u>if applicable</u> :	09/07/2012	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/w was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) pproval.	
There are no members or adopted by the board of	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dated 09/	07/2012 Chairman of vice chairman of the board, president or other officer-if directors	
have i	not been selected, by an incorporator—if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
Philip F	Russel Berry	
	(Typed or printed name of person signing)	
Directo	or	
	(Title of nercon signing)	