

N11000008595

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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U.S. DEPARTMENT OF JUSTICE

Qw
1/28/14

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Transformation Station of Florida Inc.

DOCUMENT NUMBER: N11000008595

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

Please return all correspondence concerning this matter to the following:

Philip Russel Berry
Name of Contact Person
Transformation Station of Florida Inc.
Firm/ Company
3236 Beacon Square Drive
Address
Holiday, Florida 34691
City/ State and Zip Code

prberryone@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Philip Russel Berry at (727) 992-7802
Name of Contact Person 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 9, 2014

PHILIP RUSSEL BERRY
3236 BEACON SQUARE DR.
HOLIDAY, FL 34691

SUBJECT: TRANSFORMATION STATION OF FLORIDA INC.
Ref. Number: N11000008595

We have received your document for TRANSFORMATION STATION OF FLORIDA INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

Bylaws are not filed with this office. Please retain them for your records.

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) 245-6050.

Carol Mustain
Regulatory Specialist II

Letter Number: 614A00000553

Articles of Amendment
to
Articles of Incorporation
of

Transformation 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:

N/A

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:

N/A

*(Principal office address **MUST BE A STREET ADDRESS**)*

C. Enter new mailing address, if applicable:

N/A

*(Mailing address **MAY BE A POST OFFICE BOX**)*

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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: N/A

(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, 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>D</u>	<u>Ray Teofrio</u>	<u>11131 Yellowood Ln</u>
<input checked="" type="checkbox"/> Add			<u>Port Richey, FL 34668</u>
<input type="checkbox"/> Remove			<u>_____</u>
2) <input type="checkbox"/> Change	<u>_____</u>	<u>_____</u>	<u>_____</u>
<input type="checkbox"/> Add			<u>_____</u>
<input type="checkbox"/> Remove			<u>_____</u>
3) <input type="checkbox"/> Change	<u>_____</u>	<u>_____</u>	<u>_____</u>
<input type="checkbox"/> Add			<u>_____</u>
<input type="checkbox"/> Remove			<u>_____</u>
4) <input type="checkbox"/> Change	<u>_____</u>	<u>_____</u>	<u>_____</u>
<input type="checkbox"/> Add			<u>_____</u>
<input type="checkbox"/> Remove			<u>_____</u>
5) <input type="checkbox"/> Change	<u>_____</u>	<u>_____</u>	<u>_____</u>
<input type="checkbox"/> Add			<u>_____</u>
<input type="checkbox"/> Remove			<u>_____</u>
6) <input type="checkbox"/> Change	<u>_____</u>	<u>_____</u>	<u>_____</u>
<input type="checkbox"/> Add			<u>_____</u>
<input type="checkbox"/> Remove			<u>_____</u>


The date of each amendment(s) adoption: 12/23/2013, if other than the date this document was signed.

Effective date if applicable: 12/23/2013
(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 12/31/2013

Signature 

(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)

Philip Russel Berry

(Typed or printed name of person signing)

Director

(Title of person signing)