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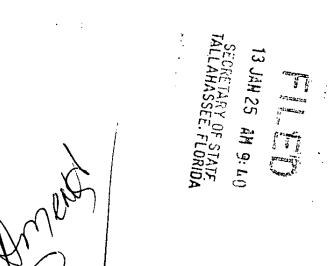
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01/25/13--01012--008 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations						
NAME OF CORPORATION: PARROTZ-R-US, Inc						
DOCUMENT NUMBER: N120004574						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
TAMMY SLY (Name of Contact Person)						
(Name of Contact Person)						
PARROTZ-R-US, INC -						
(Firm/ Company)						
5446 OLD BERKLEY RD (Address)						
(Address)						
Aubra Hale, FL 33823						
(City/ State and Zip Code)						
TSLY2665@ad.com						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
TAMMY SLY at (863) 875 - 2648 (Area Code & Doutine Telephone Number)						
(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:						
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is Enclosed)						
Mailing Address Street Address						
Amendment Section Amendment Section Division of Corporations Division of Corporations						
P.O. Box 6327 Clifton Building						
Tallahassee, FL 32314 2661 Executive Center Circle						

Tallahassee, FL 32301

FILING CANCELLED RETURNED CHECK Articles of Amendment to

Articles of Incorporation

13 JAN 25 AM 9. 40

TALLAHASSEE, FLORIOA

PARROTZ-R-US, Inc

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

N1200000 4574

(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:

	No change	٤		The ne
name must be distinguishable and contain th "Company" or "Co." may not be used in th		or "incorporated	l" or the abbreviation "Corp.	" or "Inc.
B. <u>Enter new principal office address, if a</u> (Principal office address <u>MUST BE A STR</u>		No	change	
C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF		no cho	nge	
D. If amending the registered agent and/o new registered agent and/or the new re			enter the name of the	
			enter the name of the	
new registered agent and/or the new re	egistered office addre		enter the name of the	
new registered agent and/or the new registered Agent: Name of New Registered Agent:	egistered office addre	da street address)	enter the name of the	_
Name of New Registered Agent:	egistered office addre	da street address)	, , , , , , , , , , , , , , , , , , , ,	

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:		F	FILING CANCELLED		
X Change X Remove X Add	V Mi	nn Doe ke Jones ly Smith	RETURNED CHECK		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	D	ERIC KLINE	5446 OLD BERKLEY Rd		
Add			Auburdale Fl33823		
Remove					
2) Change	$\overline{\mathcal{D}}$	BECS KLINE	5446 OLD BERKLEY RD		
Add			Auburndale FL 33823		
X Remove	7				
3)Change	<u>~</u>	DEBBIE SAUNDERS	LAKELAND FL 33811		
Add			Like KIND, IC DON		
4) Change	$\overline{\mathcal{D}}$	Sherri D. Camarata	5917 W FARKAS RD		
X Add			PLANT CITY, FL 33567		
Remove		•			
5) Change	\mathcal{D}_{-}	Debbie Green	5446 OLD Berkley Rd		
Add			Auburndale, FL 33823		
Remove					
6) Change	$\overline{\mathcal{D}}$	CRIS VICKERS	631 W Daughtery Rd		
X Add			LAKELAND, FL 33809		
Remove		Page 2 of 4			

FILING CANCELLED RETURNED CHECK

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
NO change					
No charges					
<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>					
- W					

The date of each amendment(s) a	doption: January 20	0',901,3
Effective date <u>if applicable</u> :	(no more than 90 days after a	
Adoption of Amendment(s) The amendment(s) was/were a was/were sufficient for approv		FILING CANCELLED RETURNED CHECK sher of votes cast for the amendment(s)
	nbers entitled to vote on the amendme	ent(s). The amendment(s) was/were
Signature (By the cha	irman or vice chairman of the band, een selected, by an incorporator – if it appointed fiduciary by that fiduciary	
	Tammy SLY (Typed or printed name of person s	signing)
	(Title of person signing)	