## MADDONAL

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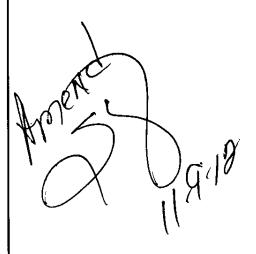


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EFFECTIVE DATE



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	Tallahass	ee New Ye	ar's Eve, Inc.
DOCUMENT NUMBER:	N120000	09214	
The enclosed Articles of Amenda	ment and fee are subm	nitted for filing.	
Please return all correspondence	concerning this matter	r to the following:	
Robert Thaler			
		(Name of Contact Perso	n)
Tallahassee No	ew Year's	Eve, Inc.	
		(Firm/ Company)	
8853 Winged F	oot Drive		
		(Address)	
Tallahassee, F	lorida 323	12	
	(	City/ State and Zip Cod	e)
	er@gmail.d	COM for future annual report	notification)
For further information concerning	ng this matter, please o	call:	
Robert Thaler		at (850	, 906-9495
(Name of Contact	Person)		ode & Daytime Telephone Number)
Enclosed is a check for the follow	ving amount made pay	able to the Florida Dep	artment of State:
	\$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 Addr Amendment Se Division of Co P.O. Box 6327 Tallahassee, Fl	ection rporations	Ameno Divisio Cliftor 2661 I	Address  Iment Section on of Corporations a Building Executive Center Circle assee, FL 32301

## **Articles of Amendment**

**Articles of Incorporation** of

11. 12 HOV S M 2.39

	Tallahassee	New	Year's	Eve.	Inc.
--	-------------	-----	--------	------	------

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

N12000009214

(Document Number of Corporation (if known)

N/A  ame must be distinguishable and contai  Company" or "Co." may not be used i	in the word "cornora	tion" or "incorporated" or the abbreviation "	/TIT
	•	non or incorporated or the appreviation	The . 'Corp.'' or "In
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS		105 East College Avenue	
		Tallahassee, Florida 3230	1
. Enter new mailing address, if appl (Mailing address MAY BE A POST		105 East College Avenue	
<u></u>	<u> </u>	Tallahassee, Florida 32301	1
		ice address in Florida, enter the name of the	
new registered agent and/or the ne	w registered office a	ice address in Florida, enter the name of the	
	w registered office a Curt Reilly	ice address in Florida, enter the name of the	
new registered agent and/or the ne  Name of New Registered Agent.	w registered office a Curt Reilly	ice address in Florida, enter the name of the address:	
new registered agent and/or the ne	w registered office a Curt Reilly	ce address in Florida, enter the name of the address: College Avenue  (Florida street address)	

## 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)

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>Mik</u>	n <u>Doe</u> te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	Robert Thaler	8853 Winged Foot Drive
Add			Tallahassee, Florida
X Remove			32312
2) X Change	PVP	Curt Reilly	105 East College Avenue
Add			Tallahassee, Florida
Remove			32301
3) Change	<u>s</u>	Mandy Atkins	105 East College Avenue
X			Tallahassee, Florida
Remove			32301
4) Change	<u></u>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

<sup>·</sup> 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.

E. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
N/A	
	<del></del>
<del></del>	

The date of each amendment	(s) adoption: November 5, 2012
'Effective date if applicable:	November 12, 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 ap	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.
Dated Nov	vember 5, 2012
Signature	2 Austlinen
have r	chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
Robert	Thaler
<del></del>	(Typed or printed name of person signing)
Preside	ent
	(Title of person signing)