

P00000005128

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H09000204963 3)))



H090002049633AB00

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : FRANK, WEINBERG, BLACK, P.L.  
Account Number : I200400000083  
Phone : (954) 474-8000  
Fax Number : (954) 474-9850

FILED  
09 SEP 30 AM 10:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

COR AMND/RESTATE/CORRECT OR O/D RESIGN

UNITED STATES VAN LINES RELOCATION DIVISION, INC.

RECEIVED  
2009 SEP 30 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

Amend.  
10-01-09

H09000204963 3

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: United States Van Lines Relocation Division, Inc.

DOCUMENT NUMBER: P00000005128

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

Please return all correspondence concerning this matter to the following:

Steven C. Elkin, Esq.  
Name of Contact Person

Frank, Weinberg & Black, P.L.  
Firm/ Company

7805 S.W. 6th Court  
Address

Plantation, FL 33324  
City/ State and Zip Code

selkin@fwblaw.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven C. Elkin, Esq. at ( 954 ) 474-8000  
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 &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(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

H09000204963 3

H09000204963 3

Articles of Amendment  
to  
Articles of Incorporation  
of

United States Van Lines Relocation Division, Inc.

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

P00000005128

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**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:

Steven C. Elkin

New Registered Office Address:

7805 S.W. 6th Court

(Florida street address)

Plantation

(City)

Florida 33324

(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

H09000204963 3

H09000204963 3

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
PD	Aldo DiSorbo	1420 Celebration Boulevard Suite 200 Orlando, FL 32747	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
PD	Aldo DiSorbo	6245 Powerline Road Fort Lauderdale, FL 33309	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:  
(attach additional sheets, if necessary). (Be specific)

---

---

---

---

---

---

---

---

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  
(if not applicable, indicate N/A)

---

---

---

---

---

---

---

---

H09000204963 3

The date of each amendment(s) adoption: September 10, 2009  
(date of adoption is required)  
Effective date if applicable: upon filing  
(no more than 90 days after amendment file date)

## Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
- "The number of votes cast for the amendment(s) was/were sufficient for approval
- by \_\_\_\_\_  
(voting group)"
- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated \_\_\_\_\_

Signature \_\_\_\_\_

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Aldo Di Sorbo

(Typed or printed name of person signing)

President

(Title of person signing)

H09000204963 3