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(Re	equestor's Name)	
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Amend.

7-6-10

COVER LETTER

TO: Amendment Section **Division of Corporations DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$43.75 Filing Fee & **☐ \$**43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy

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

(Additional Copy is enclosed)

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently)	ntly filed with the Florida Dep	t. of State)		
(Document Numl	ber of Corporation (if known)			
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	, Florida Statutes, this <i>Florida</i>	Profit Corporation	adopts the	following
A. If amending name, enter the new name of	the corporation:			
		·	The	
name must be distinguishable and contain thabbreviation "Corp.," "Inc.," or Co.," or the contain the word "chartered," "prof	designation "Corp," "Inc," or	"Co". A profession		
B. Enter new principal office address, if appli				
Principal office address <u>MUST BE A STREET</u>	TADDRESS)	74.4 3 > 6	<i>Ф</i> .	
			5	
	<u> </u>			
C. Enter new mailing address, if applicable:	•	FOR THE PARTY OF T		
(Mailing address <u>MAY BE A POST OFFIC</u>	CE BOX	``J`	= 3	133
	<u></u>	<u>a</u>	<u> </u>	
		्री इ.स.	<u>*</u> 5	
D. If amending the registered agent and/or re	egistered office address in Flor	ida, enter the name	of the	
new registered agent and/or the new registered	tered office address:			
Name of New Registered Agent:				
		•		
New Registered Office Address:	(Florida street addres			
		, Florida		
-	(City)	(Zip Code)		
New Registered Agent's Signature, if changin	g Registered Agent:			
hereby accept the appointment as registered ag		cept the obligations o	f the positi	ion.
				
Si	gnature of New Registered Ager	nt, 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)

<u>Title</u>	Name	Address	Type of Action
Hes.	Benfethnato	253 Matsecir.	Add Remove
			_
			_
	ling or adding additional Articles, ente		
<u>provisi</u>	nendment provides for an exchange, reports for implementing the amendment is of applicable, indicate N/A)	classification, or cancellation of is f not contained in the amendment	ssued shares, itself:
			<u>,, , , , , , , , , , , , , , , , , , ,</u>

The date of each amendment(s)	
Effective date if applicable:	(date of adoption is required)
(n	o more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statemen or each voting group entitled to vote separately on the amendment(s):
"The number of votes case	for the amendment(s) was/were sufficient for approval
by	"
	oting group)
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated	28/10
Signature T	and Stetlist
(By a d	lirector, president or other officer – if directors or officers have not been
	d, by an incorporator — if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
,,	
	Prelinda < Pettinato
-	(Typed or printed name of person signing)
_	Secretary
	(Title of person signing)