

P00000080724

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

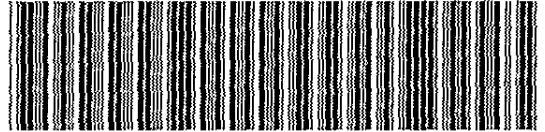
(Document Number)

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called Diane 8/2  
need letter releasing name  
BB

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FILED  
06 AUG -2 AM 10:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NC  
08/21/06

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Florida Restoration Specialists, Inc.

**DOCUMENT NUMBER:** P00000080724

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

Please return all correspondence concerning this matter to the following:

Stane Gohdeen  
(Name of Contact Person)

Florida Restoration Specialists, Inc.  
(Firm/ Company)

1027 SW 30<sup>th</sup> Ave  
(Address)

Deerfield Beach, FL 33442  
(City/ State and Zip Code)

For further information concerning this matter, please call:

Stane Gohdeen at (954) 946-4227  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$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 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

FROM

(WED) AUG 2 2006 14:51/ST. 14:50/No. 7500000898 P 2

August 2, 2006

Florida Restoration Specialist  
1027 SW 30<sup>th</sup> Avenue  
Deerfield Beach, FL 33442

To Whom It May Concern:

Florida Restoration Specialists, Inc. intend to revoke Pegasus Companies, Inc., Document # P06000091613 please honor the immediate release of the name, as our name will change from Florida Restoration Specialists, Inc. to Pegasus Companies, Inc. The officers and incorporators shall remain the same. We are asking this for Legal Name Change only for the company.

Thank you,

A handwritten signature in black ink, appearing to read 'DM', with a long horizontal flourish extending to the right.

David Morgan  
President, Florida Restoration Specialists

Florida Restoration Specialists, Inc.  
(Name of corporation as currently filed with the Florida Dept. of State)

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

700000080724

FILED  
06 AUG -2 AMID: 31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**NEW CORPORATE NAME (if changing):**

Pegasus Companies, Inc.

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**.

NS/A

If an amendment provides for 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)

N/A

(continued)

• The date of each amendment(s) adoption: 7-27-06

Effective date if applicable: 7-27-06  
(no more than 90 days after amendment file date)

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

☐ The amendment(s) was/were approved 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.

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)

David Morgan

(Typed or printed name of person signing)

President

(Title of person signing)

**FILING FEE: \$35**