P00000114741

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone	#)	
PICK-UP WAIT	MAIL	
(Business Entity Nam	ne)	
(Document Number)		
Certified Copies Certificates	of Status	
Special Instructions to Filing Officer:		





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TARRESTE PLESS

Amend AHR. 10

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	Monos No. 1, INC.	
DOCUMENT NUMBER: _ P &	00000 114741	
The enclosed Articles of Amendm	ent and fee are submitted for filing.	
Please return all correspondence co	oncerning this matter to the following:	
	Name of Contact Person	
	Name of Contact Person	
Mon	Firm/ Company	
		•
<u> </u>	LI Destinado Dr. Address	
Talle	City/State and Zip Code	
	12023 @ enbargma; / . com liress: (to be used for future aroual report notification)	
For further information concerning	,	
·	at (850) 510 . Area Code & Daytime Tele	ephone Number
Enclosed is a check for the followi	ing amount made payable to the Florida Depart	tment of State:
\$35 Filing Fee \$43.75 Filing Certificate		\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations	Street Address Amendment Section Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circl	e

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



ith the Florida Dept. of State) Joration (if known) tatutes, this Florida Profit Corporation adopts the following ation: The new corporation," "company," or "incorporated" or the "Corp," "Inc," or "Co". A professional corporation sociation," or the abbreviation "P.A."
ation: The new corporation," "company," or "incorporated" or the "Corp," "Inc," or "Co". A professional corporation
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corporation," "company," or "incorporated" or the "Corp," "Inc," or "Co". A professional corporation
\underline{S})
Tice address in Florida, enter the name of the
e
Florida street address)
, Florida
City) (Zip Code)
ed Agent: familiar with and accept the obligations of the position. New Registered Agent, 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
<u>_P</u>	Marybeth H. Dye	724 El Destrado Tallahassee, FL 32312	₽√™ Add □ Remove
<u>P</u>	Don D. Dye	424 El Destinado D. Tallahassee, FL 32312	△ □ Add – 🖎 Remove
VP	Don D. Dyc	424 El Destinado De Tallahorsee, Fl 32312	_ 🗗 Add _ □ Remove
	ding or adding additional Articles, enter dditional sheets, if necessary). (Be specij		
	N/A		
provisi	mendment provides for an exchange, recons for implementing the amendment if not applicable, indicate N/A)		

The date of each amendment	t(s) adoption: 3 - 13 · 70
Effective date if applicable:	(date of adoption is required)
Effective date <u>ff applicable</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statemented 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)
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder
Dated	4-5-10
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court cointed fiduciary by that fiduciary)
	Typed or printed name of person signing)
	Ex- Pres. Now VP (Title of person signing)