# 101000080917

(Reques	tor's Name)
(Address	S)
(Address	5)
(City/Sta	ite/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busines	ss Entity Name)
(Docume	ent Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	Officer:
·	

Office Use Only



600213364036

10/19/11--01003--010 \*\*35.00

Amrs/M

11 NOV - I PH 3: 1,49 SECRETARY OF STATE ALLAHASSEE FLORID.

-11-41



### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 20, 2011

DAVE GOLDBERG DAVE GOLDBERG FINANCIAL SERVICES INC 825 E COWBOY WAY #106 LABELLE, FL 33935

SUBJECT: CAROLINE DUNN, INC.

Ref. Number: P01000080917

We have received your document for CAROLINE DUNN, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific business purpose of the professional association must be stated in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts Regulatory Specialist II

Letter Number: 911A00024049

www.sunbiz.org

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF COR	PORATION:	CAROLINE DUNN INC	<u></u>
DOCUMENT NU	JMBER:	P01000080917	
The enclosed Arti	cles of Amendment and fee	are submitted for filing.	
Please return all co	orrespondence concerning th	nis matter to the following:	
		DAVE GOLDBERG	<del></del>
		Name of Contact Person	
	DAVE GÖLDBE	ERG FINANCIAL SERVICES IN	<u>c</u>
		Firm/ Company	
	· 825 E	COWBOY WAY #106	
		Address	
	L	ABELLE, FL 33935	
		City/ State and Zip Code	
<u></u>	DAVET E-mail address: (to be us	TAXES@AO.COM ed for future annual report notification)	
For further inform	ation concerning this matter	, please call:	•
DA	VE GOLDBERG	us (	2-8151
Name	of Contact Person	Area Code & Daytime Tele	phone Number
Enclosed is a chec	k for the following amount i	nade payable to the Florida Depart	ment of State:
S35 Filing Fee	S43.75 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)
P.O. Box 6	nt Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	<b>:</b>

Tallahassee, FL 32301

# **Articles of Amendment** to ' **Articles of Incorporation**

## CAROLINE DUNN INC

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

P01000080917

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1 amendment(s) to its Articles of Incorporation		a Profit Corporation adopts the follo
A. If amending name, enter the new nam	e of the corporation:	² yi,
	ROLINE DUNN P.A.	The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," "	the designation "Corp," "Inc," or	"Co". A professional corporation
B. Enter new principal office address, if a (Principal office address MUST BE A STR		
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF)  D. If amending the registered agent and/onew registered agent and/or the new reg	or registered office address in Flo	rida, enter the name of the
Name of New Registered Agent:	DAVE GOLDBERG FINAL	NCIAL SE
New Registered Office Address:	825 E COWBOY WAY #10 (Florida street address	<del></del>
•	LABELLE (City)	, Florida 33935 (Zip Code)
New Registered Agent's Signature, if char I hereby accept the appointment as registere	nging Registered Agent: d agent. I am familiar with and account of the Registered Age.	$\supset \angle$

Page 1 of 3

E. If amending or adding additional Articles, enter change(s) here		
(attach additional sheets, if necessary).	(Be specific)	
SPECIFIC BUSINESS PURPOSE:		
REAL ESTATE SALES & RENTALS		
·		
	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
provisions for implementing the ame		
provisions for implementing the ame		
provisions for implementing the ame		
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	

The date of each amendment(s) adoption: 10/13/11		
	(date of ådoption is required)	
Effective date <u>if 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/w	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 statemened 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	
action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated 10/1	ordine Jum	
selo	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 ointed fiduciary by that fiduciary)	
	CAROLINE DUNN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	