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APR 1 7 2012 T. LEWIS

COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: SHERRI DOCUMENT NUMBER:	OTCENASEK P.A.
DOCUMENT NUMBER: PC	1000087177
The enclosed Articles of Amendment and fee are sul	bmitted for filing.
Please return all correspondence concerning this mat	ter to the following:
SH.	RRI OTCENASEK Name of Contact Person
	Name of Contact Person
SHER	Firm/ Company 410072 Address Ourne, FC 32941 City/ State and Zip Code O & Cfl, rr, comed for future annual report notification)
0	Firm/ Company
PO BOX	410072
	Address
Melbi	oyrne, to 32941
	City/ State and Zip Code
Shervi	a @ cfl.rr. um
E-mail address: (to be us	ed for future annual report notification)
	•
For further information concerning this matter, pleas	e call:
Jherri Otcenasek	at (321) 431-0882 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
\$35 Filing Fee \$\times \$	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status
Gormone or Status	(Additional copy is Certified Copy
	enclosed) (Additional Copy is enclosed)
	is enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment

FILED

· --

to

·	Articles of Incorporation	12 API	R 16 AH 10: 10
SHERRI	OTCENASER F		TARY OF STATE
(Name of Corporation as curr	ently filed with the Florida Dept. of	State)	
ΡΛΙΝΟδι	クタフノフフ		
(Document Nur	mber of Corporation (if known)	,	Press
(Document Par	noor or corporation (if known)		
Pursuant to the provisions of section 607.1006,	, Florida Statutes, this Florida Profit	Corporation adopts the following	ng amendment(s) to
its Articles of Incorporation:		0 .	
A. If amending name, enter the new name o		RI-O & COMPA	NY, Inc.
SHERRI-O X C	OMPANY, INC		The new
name must be distinguishable and contain t "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "Co". A profes.	" or "incorporated" or the c sional corporation name must	abbreviation contain the
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>			_
C. Enter new mailing address, if applicable (Mailing address <u>MAY BE A POST OFFI</u>	<u>CE BOX</u>)	30x410072 .lbourne,FL	- _32941
D. If amending the registered agent and/or new registered agent and/or the new registered agent agen		enter the name of the	-
Name of New Registered Agent Sc	w.		•
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida	
wew negisiered Office Address.	(City)	(Zip Code)	_
New Registered Agent's Signature, if changi	ing Registered Agent:		
hereby accept the appointment as registered o		the obligations of the position.	
Signatu	re of New Registered Agent, if changing	no	

If amending the Officers address of each Officers (Attach additional sheets,	and/or D		irector being removed and title, name, and
P = President; V = Vice I	President, = Chief F	e by the first letter of the office title: ; T= Treasurer; S= Secretary; D= Director; TR= Tri Financial Officer. If an officer/director holds more th or would be PTD.	
	ves the co	llowing manner. Currently John Doe is listed as the P. orporation, Sally Smith is named the V and S. These sh ly Smith, SV as an Add.	
Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change Add Remove			
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			

_ Change _ Add _ Remove

attach addition	adding additional Ar al sheets, if necessary)	. (Be specific)	ige(s) here: N	H	
	····				
			<u>.</u>		_
	<u> </u>				
	, <u>, , , , , , , , , , , , , , , , , , </u>				
if not appl	nt provides for an exc implementing the am icable, indicate N/A)	change, reclassific endment if not co	cation, or cancell ontained in the ar	ation of issued sha mendment itself:	res,
MIA					
	y u				
	· · · · · · · · · · · · · · · · · · ·				
	 				

The date of each amendment(s) add	option: 4/17/12
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
☐ The amendment(s) was/were appromust be separately provided for e	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder
The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and shareholder
Dated	2/12
Signature (P.)	
selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
_	Sherri Otcerasek (Typed or printed name of person signing)
	(Typed or printed name of person signing)
_	President
	(Title of person signing)