# P02000001653

(Re	questor's Name)	<del> </del>
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TALLAHASSEE, FLORID

Amend

OCT 3 0 2012 T. LEWIS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

in the bit combination	porate Debtion	ation, Inc.		
DOCUMENT NUMBER: P0200	00001653			
The enclosed Articles of Amendment		or filing.		
Please return all correspondence conce	rning this matter to the	following:		
Paul Eise	nberg			
	Name	of Contact Person	<u> </u>	_
Corporate	e Debtication,	Inc.		
	F	rm/ Company		
6800 Bro	ken Sound Pa	arkway NW	1	
		Address		
Boca Rat	on, FL 33487			
	City/ S	State and Zip Code	9	_
peisenbera@	)jmandw.com			
	ress: (to be used for fu	ure annual report	notification)	
For further information concerning this	matter, please call:			
Paul Eisenberg		at (561	241-2500	,
Name of Contact Person	n .		de & Daytime Telephone Num	ber
Enclosed is a check for the following a	mount made payable to	the Florida Depa	rtment of State:	
\$35 Filing Fee	e of Status Certi (Add	75 Filing Fee & fied Copy is osed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address  Amendment Section  Division of Corporat			Address ment Section	

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



# Corporate Debtication, Inc.

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

### P02000001653

ent(s) to

(Documer	t Number of Corporation	(if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corpo	ration adopts the following amendme
A. If amending name, enter the new na	me of the corporation:		The new
name must be distinguishable and con. "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional	"incorporated" or the abbreviation
B. Enter new principal office address,	if annlicable:	N/A	
(Principal office address MUST BE A S			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A	
D. If amending the registered agent an new registered agent and/or the new			the na me of the
Name of New Registered Agent	Ronald M. Gac	he, P.A.	
	2424 N. Federal	Highway, Suite	======================================
		treet address)	
New Registered Office Address:	Boca Raton		, Florida 33431
,	(Cit	v)	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Ager	ıt:	
I hereby accept the appointment as regist			bligations of the position.
S	nature of New Registered	Agent, if changing	<del></del>

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove			<u> </u>
3) Change			<u> </u>
Add			
Remove			**************************************
4) Change		<u> </u>	
Add			
Remove			
5) Change			
Add			
Remove			
			<del></del>
6) Change			
Add			
Remove			

E. If amending or adding additional Arti	cles, enter change(s) here:
(Attach additional sheets, if necessary).	(Be specific)
N/A	
,	
	<del></del>
	,
F. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	
<del></del>	

The date of each amendment(s) a	doption: October 18, 2012
Effective date if applicable:	ctober 18, 2012
<u>рысылг</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement 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.	opted by the board of directors without shareholder action and shareholder
action was not required.	opted by the incorporators without shareholder action and shareholder
<sub>Bard</sub> Octob	er 18, 2012
Signature	Paul En
(By a c	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court attend fiduciary by that fiduciary)
	Paul Eisenberg
	(Typed or printed name of person signing)
	Vice President & Director
	(Title of person signing)