## PO20003173/

. (Re	questor's Name)	
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE





## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

	,	
NAME OF CORPORATION: $\overline{\mathcal{D}\mathcal{P}}$	MGPRING AGRON	OMIC SERVICE
DOCUMENT NUMBER: PO	72000021731	
The enclosed Articles of Amendment and f	ee are submitted for filing.	
Please return all correspondence concerning	g this matter to the following:	. *
PETER	E G KALOGEIDIS ame of Contact Person)	· · · · · · · · · · · · · · · · · · ·
DAY SPEING	AGPONOVIIC SERVICE (Firm/Company)	LES, INC.
P.O. BOX	770568 (Address)	·
WINTER C	SARDEN, FL. 34 ty/State and Zip Code)	777-0568
For further information concerning this may	tter, please call:	
PETER G. KALOGRIDI (Name of Contact Person)	407 55 (Area Code & Daytime	7-053Z Telephone Number)
Enclosed is a check for the following amou	int:	
\$35 Filing Fee \$\times \text{S43.75 Filing Fee & Certificate of Status}	S43.75 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 Ci	rçle

Tallahassee, FL 32301

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



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

PO 200002173)
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:  NEW CORPORATE NAME (if changing):
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
ADDITIONS (V)
TITLE: SECRETARY TREASURER
NAME! PETRYCIA L. KALOGRIDIS
ADDRESS: D.O. BOX 770568
CITY-ST-ZIP: WINTER GARDEN, FL. 34777-0568
· · · · · · · · · · · · · · · · · · ·
(Attach additional pages if necessary)
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)

(continued)

The date of each amendment(s) adoption: NOYEMBER 1, 2007
Effective date if applicable: NOVEMBER 15, 2007  (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)  PETER 6. KALOGEIDIS  (Typed or printed name of person signing)
PRESIDENT (Title of person signing)

FILING FEE: \$35