## P0200065516

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| PICK-UP                                 | ☐ WAIT             | MAIL        |
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| Certified Copies                        | _ Certificates     | s of Status |
| Special Instructions to Filing Officer: |                    |             |
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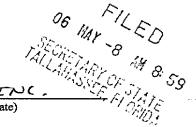
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: SUNSWEDT ENTERPRISES OF  |
|---|
| DOCUMENT NUMBER: <u>P02000665514</u>  |
| The enclosed Articles of Amendment and fee are submitted for filing.  |
| Please return all correspondence concerning this matter to the following:   |
| CARKE MAYNIKO (Name of Contact Person)  |
| SUNSWEDT ENTERPUSES (Firm/Company)  |
| 106 BOSKINP RP-<br>(Address)  |
| FNDZALANTC FL 32903 (City/ State and Zip Code)  |
| For further information concerning this matter, please call:  |
| (Name of Contact Person) at (321) 727-0944<br>(Area Code & Daytime Telephone Number)  |
| Enclosed is a check for the following amount:   |
| \$35 Filing Fee Certificate of Status  Certificate of Status  (Additional copy is enclosed)  \$35.50 Filing Fee Certificate of Status  Certificate of Status  Certificate of Status  Certificate Opy  (Additional Copy is enclosed) |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301                  |

## Articles of Amendment to Articles of Incorporation



SUNSWERT ENTERPHISES OF FLORIDA, INC
(Name of corporation as currently filed with the Florida Dept. of State)

PO 20000 65 5/4 (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)

ALTICLE VIII - The name and address of the President of this curporation is Danny Ray (ESTER IDGE Bosting Road, That alamnic Florida 3290 3

The name and address of the Vice President

Of this corporation is CARRIE MAYNARD

104 Boskind Road, Institutortic, Florida 32903

ARTICLE II - The registered office of this corporation

Shull be 106 Boskind Road, Inclia/antic, Florida 32903-The corporation designate its Registered Agent, DANNY R. LESTER(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)

| 2/1/1/2   |
|---|
| The date of each amendment(s) adoption: 3/1/06  |
| Effective date if applicable: 3/1/86  |
| (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) |
| DAN LESTER  |
| (Typed or printed name of person signing)   |
| PRESIDENT   |
| (Title of person signing)   |

FILING FEE: \$35