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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: EDSON'S	GENERAL CONTRACT	ORS, INC
DOCUMENT NUMBER: P02000092565	<del></del>	
The enclosed Articles of Amendment and fee a	re submitted for filing.	
Please return all correspondence concerning thi	s matter to the following:	
<del></del>	ATA ALCANTARA of Contact Person)	
(Ivanie c	of Contact Person)	
	JS PROFESSIONAL SERVICES	, INC
(Fir	m/Company)	
	RWAY DRIVE # 214	
	(Address)	
	LD BEACH, FL 33441 late and Zip Code)	
For further information concerning this matter,	•	
RENATA ALCANTARA	at ( <u>954</u> ) <u>913-152</u>	
(Name of Contact Person)	(Area Code & Daytim	e Telephone Number)
Enclosed is a check for the following amount m	nade payable to the Florida De	partment of State:
▼\$35 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 C Tallahassee, FL 32301	

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



(Name of Corporation as currently filed with the Florida Dept. of State)		
P02000092565 (Document Nu	umber of Corporation (if known)	
Pursuant to the provisions of section 607.10 following amendment(s) to its Articles of Inco		Corporation adopts the
A. If amending name, enter the new name	of the corporation:	
The new name must be distinguishable "incorporated" or the abbreviation "Corp., "Co". A professional corporation namassociation," or the abbreviation "P.A."	" "Inc.," or Co.," or the designation "	Corp," "Inc," or
B. Enter new principal office address, if ap (Principal office address MUST BE A STRE		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		
D. If amending the registered agent and/or new registered agent and/or the new reg		er the name of the
Name of New Registered Agent:		_
New Registered Office Address:	(Florida street address)	_
	(City)	_, Florida (Zip Code)
New Registered Agent's Signature, if chang I hereby accept the appointment as registered position.		ot the obligations of the
	Signature of New Registered Agent, if cha	inging

## 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VP</u>	ROSSANA BURGOS	4037 CARAMBOLA CIRCLE N COCONUT CREEK, FL 33066	•
			Add Remove
			Add Remove
(attach d	ding or adding additional Articles, on additional sheets, if necessary). (Be additional sheets, if necessary).	specific)	
<u>provisi</u>	mendment provides for an exchange ions for implementing the amendmenot applicable, indicate N/A)	e, reclassification, or cancellation of iss nt if not contained in the amendment i	ued shares, tself:

The date of each amendment(s	adoption: 12/28/08
Effective date if applicable:	12129 108
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
	ast for the amendment(s) was/were sufficient for approval
by	voting group)
(	voiting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated	12/20/08
Signature	Dorana Ragos
(By a	director, president or other office - if directors or officers have not been
	ted, by an incorporator — if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
wrr-v	
	ROSSANA BURGOS
	(Typed or printed name of person signing)
	VICE-PRESIDENT
	(Title of person signing)