P02060129095

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	RPORATION: AM INCOME TA	X SERVICES, INC.	
DOCUMENT	NUMBER: P02000129095	,	<u></u>
The enclosed A	rticles of Amendment and fee ar	e submitted for filing.	
Please return all	correspondence concerning this	matter to the following:	
А	NNETTE L MURCIA		and the second s
	(Name o	f Contact Person)	
A	M INCOME TAX SERVICES, INC.	·	· · · · · · · · · · · · · · · · · · ·
_	(Firr	n/ Company)	
54	149 S SEMORAN BLVD STE-12A3		<u></u>
	((Address)	
0	RLANDO, FL 32822	,	<u> </u>
	(City/ Sta	ate/ and Zip Code)	
For further info	rmation concerning this matter, p	please call:	
ANNETTE L MU	RCIA	at (407) 207-2227	
(N	ame of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a ch	neck for the following amount:		
₩ \$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ī	Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Secti Division of Corpo 409 E. Gaines Stre	rations

Tallahassee, FL 32399

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

OF OF SHAPE SHAPE

AM INCOME TAX SERVICES, INC.

P02000129095

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

(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> 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)
ARTICLE VI & VII. ADDRESS CHANGE FROM 729 WHISPERING CYPRESS LN ORLANDO, FL 32824
TO 3019 FLORENCIA DR KIŞSIMMEE, FL 34744.
(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)
All A.

(continued)

The date of each amendmen	t(s) adoption: 12	/01/2004
Effective date if applicable	12/01/2004	
	(no more than 90 d	ays after amendment file date)
Adoption of Amendment(s)	(<u>CHECK</u>	ONE)
		ed by the shareholders. The number of votes cast for swas/were sufficient for approval.
	t must be separate	ed by the shareholders through voting groups. The ely provided for each voting group entitled to vote
"The number o	f votes cast for the	amendment(s) was/were sufficient for approval by
	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	(voting group)
☐ The amendment(s) and shareholder ac		by the board of directors without shareholder action red.
☑ The amendment(s) shareholder action		by the incorporators without shareholder action and
Signed this 06 day of DECEMBER		2004
selec	director, president or sted, by an incorporate sinted fiduciary by tha	other officer - if directors or officers have not been or - if in the hands of a receiver, trustee, or other court fiduciary)
ANI	NETTE L MURCIA	
	(Typed or	printed name of person signing)
Vic	E-PRESIDENT	
		(Title of person signing)

FILING FEE: \$35