## P0300017733

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C. Coullierte SEP 1 3 2005

## **COVER LETTER**

Division of Corporations	
NAME OF CORPORATION: CONSULTATION PARTNERS INC.	st J <sup>ro</sup>
DOCUMENT NUMBER: PØ3ØØØØ17733	5-1 T
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
BINA AlleN	
(Name of Contact Person)	匹'"
CONSULTATION PARTNERS INC. (Firm/Company)	· we
(Firm/ Company)	
9417 SATIN LEAF PL	
(Address)	1702.3
PARKLAND FL 33076	
(City/ State/ and Zip Code)	
For further information concerning this matter, please call:	,
BINA AlleN at (305) 251-4814	B 30.0
(Name of Contact Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status  Certificate of Status  (Additional copy is enclosed)  (Additional Copy  (Additional Copy	

## **Mailing Address**

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## **Street Address**

Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

is enclosed)

Articles of Amendment to Articles of Incorporation

Articles of Incorporation	
of the second se	<u>,</u>
CONSULATION PARTNERS, INC.	M
(Name of corporation as currently filed with the Florida Dept. of State)	,0
PO300017733	r,
(Document number of corporation (if known)	955 (#4 g #2
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.")	o and comments
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	alleborate par i visita de 10
Change OF ADDRESS FROM PREVIOUS TO 9417 SATTIN LEAF PLACE	
PARKLAND FLORTDA, 33076.	The day is the same of
	and a great state of
Remove OFFICER NAMES FROM PUBLIC RECORDS FOR	+ + <u>++++++++++++++++++++++++++++++++++</u>
BINA ALLEN (FORMERLY BINA MIRCHANDANI, AND ALSO	
Steven E Allen.	E We grassman ?
The state of the s	'- \* == e\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	<u>\$</u> 33
(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)

9/1/05	
The date of each amendment(s) adoption: 7/1/05	
Effective date if applicable: 9/1/05 (no more than 90 days after amendment file date)	.८ ८ कीश्रास <sup>्ट</sup> कर
Adoption of Amendment(s) (CHECK ONE)	e e
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	Terrana
(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.	
Signed this day of Septem Ben, 2005.	, N-
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)	, , are so
BINA AlleN (Typed or printed name of person signing)	沒 代 (1) (2·2·2·2·4)
Ceo/PrestDenT.	e ee beer
(Title of person signing)	in in a state of the second of

\* \* \* \* \*

FILING FEE: \$35