P03000024296

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TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	E.S.I.F., INC.	·
DOCUMENT NUMBER:		P0300024296	
The enclosed Artic	cles of Amendment and fee	are submitted for filing.	
Please return all co	orrespondence concerning th	is matter to the following:	
		Trudy Shore	
	I	Name of Contact Person	
	Rick M. Morse, C.P.A., P.A.		
	Firm/ Company		
	5521 N. University Drive, Suite 201 Address		
		ral Springs, FL 33067 City/ State and Zip Code	
	rmmo E-mail address: (to be use	rsecpa@aol.com ed for future annual report notification)	<u> </u>
For further inform	ation concerning this matter	, please call:	
Name	Trudy Shore	at (954) 75 Area Code & Daytime Tele	52-2828 ephone Number
		nade payable to the Florida Depart	•
☑ \$35 Filing Fee	☐ \$43.75 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)
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	e

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED
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.I.F., INC.	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	8 PM 12. a.
ntly filed with the Florid	a Dept. of State) TALL A FIAR	×
00024296	LAHASS	EE. FLORIS
ber of Corporation (if kno	own)	TONIBA
, Florida Statutes, this F	lorida Profit Corporation ado	pts the followin
the corporation:		
		The new
designation "Corp," "Inc	c," or "Co". A professional c	
icable:	,	
(ADDRESS)		_
E BOX)		_
		-
		_
	n Florida, enter the name of t	<u>he</u>
tered office address:		
(Florida street d	address)	
,	•	
/m+. \	, Florida	<u></u>
(City)	(Zip Code)	
g Registered Agent:		
	and accept the obligations of the	e position.
anature of New Registere	d Agent if changing	
	the corporation: ne word "corporation," designation "Corp," "Indessional association," or icable: "ADDRESS") gistered office address is ered office address: (Florida street a (City) g Registered Agent: ent. I am familiar with a	gistered office address in Florida, enter the name of tered office address: (Florida street address) (Florida street address) (Florida (City) (Zip Code)

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>	<u>Address</u>	Type of Action
PD	Jones, Harry W	1668 NE 40th Street Oakland Park, FL 33334	
<u>VP</u>	Jones, Patricia	1668 NE 40th Street Oakland Park, FL 33334	☑ Add □ Remove
PD	Jones Patricia	FL	
	ding or adding additional Articles, ente dditional sheets, if necessary). (Be spec		
provisi	nendment provides for an exchange, reons for implementing the amendment is total applicable, indicate N/A)		
	···		

The date of each amendmen	t(s) adoption: August 1, 2010
Effective date if applicable:	August 1, 2010 (date of adoption is required)
Entetive date <u>if applicable</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	are approved by the shareholders through voting groups. The following statement and 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/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_Sep	tember 30, 2010
sele	Pata Montage Pata
	Patricia Jones
	(Typed or printed name of person signing)
	Vice President
	(Title of person signing)