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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MAUREEN F DOYLE
DOCUMENT NUMBER: PO 3000030778
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MAUREED DOYLE (Name of Contact Person)
(Firm/ Company)
1258 STONEYWOOD WAY
APOPKA, FI 32712 (City/ State and Zip Code)
For further information concerning this matter, please call:
MAUREN DOGLE at 47 592-3638 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S35 Filing Fee Scrifficate of Status Certified Copy Certificate of Status (Additional copy is enclosed) S43.75 Filing Fee & 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 Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

OE JUL 18 AM 10: 43

	MAUROOD F. DOULE, PARETARY OF
	MAUGOD F. DOULE. PARETARY OF (Name of corporation as currently filed with the Florida Dept. of State)
	PD 3000D 30778
	(Document number of corporation (if known)
	the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> following amendment(s) to its Articles of Incorporation:
EW CO	RPORATE NAME (if changing):
Must contai A professio	n the word "corporation," "company," or "incorporated" or the abbreviation "Corp./ "Inc.," or "Co.") nal corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
	MENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) icle Title(s) being amended, added or deleted: (BE SPECIFIC)
· · · · · · · · · · · · · · · · · · ·	
	(Attach additional pages if necessary)
	(Attach and months pages it necessary)
	dment provides for exchange, reclassification, or cancellation of issued shares, provisions nenting the amendment if not contained in the amendment itself: (if not applicable, indicate N/A

(continued)

The date of each amendment(s) adoption: Tuly 12, 2006
Effective date if applicable: (no more than 90 days after amendment file date)
(to more than >0 and a area transmission the asso)
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)
MAUREE F DOVIE (Typed or printed name of person signing)
PROSIDET (Title of person signing)

FILING FEE: \$35