P03000031313

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DIVISION OF CORPORATIONS
12 MAR 22 AM 9: 33

Amend CC (10 3/03/12

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: A.F.C.G., Inc. P03000037313 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Regina Spanier Name of Contact Person A.F.C.G., Inc. Firm/ Company 20283 State Road 7, Suite 211 Address Boca Raton, Florida 33498 City/ State and Zip Code IRT SPANIER @ Comcust. net
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Regina Spanier Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & \$52.50 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to Articles of Incorporation

01		
A.F. C.G., Inc		_
(Name of Corporation as currently filed with the Flo	orida Dept. of State)	
P 030000	237313	
(Document Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cword "chartered," "professional association," or the abbreviation "F	Co". A professional corporation name must	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NA	2 HB 22
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N A	- 44 9: 33 - 9: 33
D. If amending the registered agent and/or registered office addressive new registered agent and/or the new registered office address:	ess in Florida, enter the name of the	_
Name of New Registered Agent	<u>) († </u>	
New Registered Office Address:	et address) , Florida	_
(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	ith and accept the obligations of the position.	
N/	θ	
Signature of New Registered Ag	gent, if changing	

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange	<u>PT</u> <u>Joh</u>	ın Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change X Add Remove	<u>s</u>	Spanier, Regina	20283 State Rd. 7 Svite 211 Boca Raton FL 33496
2) X Change Add Remove	PTD	Spanier, J.	1/
3) Change Add Remove			· · · · · · · · · · · · · · · · · · ·
4) Change Add Remove			
5) Change Add Remove			<u> </u>
6) Change Add Remove			

. If amending or adding additional Article (attach additional sheets, if necessary).	e <mark>s, enter cnange(s) nere</mark> : (Be specific)
	IV A
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,	·
If an amendment provides for an exchan provisions for implementing the amenda (if not applicable, indicate N/A)	nge, reclassification, or cancellation of issued shares, ment if not contained in the amendment itself:
N	A

The date of each amendment(s) adoption:					
Effective date if applicable:					
	(no more than 90 days after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)				
The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.				
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):				
"The number of votes cas	t for the amendment(s) was/were sufficient for approval				
by	(voting group)				
	(voting group)				
action was not required.	lopted by the board of directors without shareholder action and shareholder				
action was not required.	lopted by the incorporators without shareholder action and shareholder				
Dated	3/14/12				
Signature					
(By a select	differior, president or other officer – if directors or officers have not been e., by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)				
/	Spanier, J.				
/ .	(Typed or printed name of person signing)				
	President				
	(Title of person signing)				