

Division of Corporations

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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : LEGALZOOM.COM INC.  
Account Number : I20010000062  
Phone : (323) 962-8600  
Fax Number : (323) 962-3889

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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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COR AMND/RESTATE/CORRECT OR O/D RESIGN  
ALIVAN'S, INC.

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** ALIVAN'S, INC.

**DOCUMENT NUMBER:** P03000039292

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Barbara Dang  
(Name of Contact Person)

Legalzoom.com, Inc.  
(Firm/ Company)

100 W. Broadway Suite 100  
(Address)

Glendale, CA 91210  
(City/ State and Zip Code)

For further information concerning this matter, please call:

Barbara Dang at ( 323 ) 962-8600 x7950  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☒ \$43.75 Filing Fee &  
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enclosed)

☐ \$52.50 Filing Fee  
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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

ALIVAN'S, INC.

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

P03000039292

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**  
(Principal office address **MUST BE A STREET ADDRESS**)

**C. Enter new mailing address, if applicable:**  
(Mailing address **MAY BE A POST OFFICE BOX**)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

801 HARRISON AVE.

New Registered Office Address:

(Florida street address)

PANAMA CITY

(City)

Florida 32401

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
Signature of New Registered Agent, if changing

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**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>	<u>Type of Action</u>
D	WEDZIK, DAVID	P.O. BOX 387 PANAMA CITY, FL 32402	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
VP	BREEGLE, BRUCE	P.O. BOX 387 PANAMA CITY, FL 32402	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
D	JENNIFER WEDZIK	P.O. BOX 387 PANAMA CITY, FL 32402	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**

*(attach additional sheets, if necessary). (Be specific)*

Article VII - Please change the address of the following officers:

President, DAVID WEDZIK 801 HARRISON AVE. PANAMA CITY FL 32401 US to

P.O. BOX 387., PANAMA CITY, FL 32402

Treasurer, JENNIFER WEDZIK, 801 HARRISON AVE PANAMA CITY FL 32401 US to

P.O. BOX 387., PANAMA CITY, FL 32402

Secretary, JOY BREEGLE 801 HARRISON AVE. PANAMA CITY FL 32401 US to

P.O. BOX 387., PANAMA CITY, FL 32402

**F. If an amendment provides for an 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)*

The date of each amendment(s) adoption: 11/4/2011

Effective date if applicable:

*(no more than 90 days after amendment file date)*

Adoption of Amendment(s)

**(CHECK ONE)**

☐ The amendment(s) was/were adopted 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.

Dated November 14, 2011

Signature Jay Breegle  
(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)

JOY BREEGLE

(Typed or printed name of person signing)

Secretary

(Title of person signing)