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2010 JUN 23 PH 1: 08
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Amend

JUN 24 2010

COVER-LETTER

Division of Corporations
NAME OF CORPORATION: Rentz Asset Management, Inc.
DOCUMENT NUMBER: 10300149376
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Walter Rentz Name of Contact Person—
Reatz Asset Mant, Inc
PO Box 620965 Address
Orlando FL 32862-0965 City/ State and Zip Code
Walter Eglistate Con E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Walter Rest at (407) 956-699 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 \$\bigcup \\$43.75 Filing Fee &
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

Articles of Amendment FILED 2010 JUN 23 PH 1:08 Articles of Incorporation (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: 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:

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

New Registered Office Address:

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

(City)

Signature of New Registered Agent, if changing

(Florida street address)

Florida

(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)

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The date of each amendment(s) a	adoption: <u>5/24/2</u>	2010	
TOPE AND	(date of adoptio	n is required)	
Effective date if applicable: (no	o more than 90 days after amend	dment file date)	
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ad by the shareholders was/were s	dopted by the shareholders. The ufficient for approval.	number of votes cast for the am	endment(s)
The amendment(s) was/were ap must be separately provided for	oproved by the shareholders thro r each voting group entitled to v	ough voting groups. The following or the amendment	ng statement nt(s):
"The number of votes cast	for the amendment(s) was/were	sufficient for approval	
by		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	ting group) lopted by the board of directors	without shareholder action and s	shareholder
·	lopted by the incorporators with	out shareholder action and share	cholder
Dated	4/10		
Signature(By a di	latty Acresident or other officer	r – if directors or officers have n	ot been
	l, by an incorporator – if in the hed fiduciary by that fiduciary)	nands of a receiver, trustee, or ot	her court
_	Walter Re	1t2	
	(Typed or printed nam	e of person signing)	
_	(Title of person signing)		