

04000024032

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

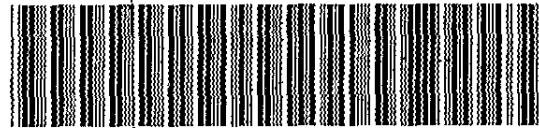
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000040204260

08/16/04--01067--006 **35.00

RECORDS DIVISION
TALLAHASSEE, FLORIDA

04 AUG 16 PM 12:03

FILED

As of 2/04
Amend

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: DC HOMES PLUS, Inc

DOCUMENT NUMBER: PO40000 24032

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

Please return all correspondence concerning this matter to the following:

DEVIN C. BROWN
(Name of Contact Person)

IMS, LLC
(Firm/ Company)

6679 RACQUET CLUB DR
(Address)

LAUDERHILL, FL 33319
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

DEVIN BROWN at (954) 709-0940
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 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
409 E. Gaines Street
Tallahassee, FL 32399

Articles of Amendment
to
Articles of Incorporation
of

DC Homes Plus, Inc.

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

FILED

04 AUG 16 PM 12:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PO4000024032

(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:

NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

PRESIDENT: ELLONIA CAMPBELL

1851 NW 5TH PLACE

POMPAHO BEACH, FL 33060

(Attach additional pages if necessary)

If an amendment provides for 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)

(continued)

The date of each amendment(s) adoption: August 3, 2004

Effective date if applicable: August 3, 2004
(no more than 90 days after amendment file date)

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.

Signed this 10TH day of AUGUST, 2004.

Signature X Campbell V.P.
(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)

DANIEL CAMPBELL
(Typed or printed name of person signing)

VICE PRESIDENT
(Title of person signing)

FILING FEE: \$35