## P04000024745

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: HANDWESTING	Profiles. Com	
DOCUMENT NUMBER: P040000247	45	
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
Michael Kahlowsi (Name of C	Contact Person)	, E' , <del>'Bu'''                                  </del>
HANDWRITING Profiles. (Firm)	Company)	15 25
9150 Whistoble WACK	ddress)	<b>*</b> , *
Tarockac, Fc. 33321  (City/ State)  For further information concerning this matter, ple	e and Zip Code) ease call:	The Care Section 1995
Michael Kahlowsky (Name of Contact Person)  Enclosed is a check for the following amount:	at (561 ) 302-7655 (Area Code & Daytime Telephone Number)	خين <sub>ب</sub> ي
□\$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) 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

(Name of corporation as currently filed with the Florida Dept. of State)	100
P040000 24745	
(Document number of corporation (if known)	11 King ## = 1
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporat</i> adopts the following amendment(s) to its Articles of Incorporation:	tion
NEW CORPORATE NAME (if changing):	
No change	
(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 '	
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Num	ber(s)
and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	
ARTICLE 6 - INITIAL Registered office and Agent	
- please Ameno the initial registered office of this corporation to: Ec	06
9150 Whistable WACK, TAMARAC, FL. 33321	BIT
ARTICLE 7 - INITIAL Board of Directors	# F
- please amend the address of the initial director of the Corporation + 500 9150 Whistable WALK, Tamprac, Fl. 33321	œ D
ARTICLE B - Incorporator	ov 
- please amono the address of the person signing these articles to:	
ABJICLE 15 - Principal Place of Business of Corporation	
please and in the principal place of business of the Congression to:	
9150 Whistable WALK, TAMARAC, FL 33321  (Attach additional pages if necessary)	
If an amendment provides for exchange, reclassification, or cancellation of issued shares, profor implementing the amendment if not contained in the amendment itself: (if not applicable, independent of the contained in the amendment itself) and the contained in the amendment itself.	

(continued)

The date of each amendment(s) adoption: 12/1/2006
Effective date if applicable: (12/1/2006)  (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.
Signature Michwel Kalley  (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)
Michael Kahlowsky
(Typed or printed name of person signing)
Parcoast

FILING FEE: \$35

(Title of person signing)