

P040000027818

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

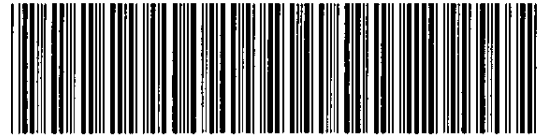
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000162615540

Name Change

11/20/09--01005--007 **52.50

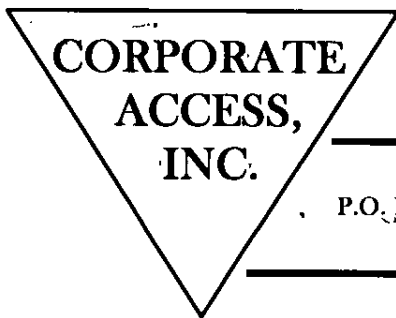
& Amend

RECEIVED
09 NOV 20 AM 11:44
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
2009 NOV -20 PM 3:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ADP

11/20/09



When you need ACCESS to the world

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P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

PICK UP:

11/20 Emily



CERTIFIED COPY



PHOTOCOPY



CUS

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FILING

Amend

1.

As Bales Enterprises, Inc.
(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

Articles of Amendment
to
Articles of Incorporation
of

AS BALES ENTERPRISES, INC.

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

P04000027818

(Document Number of Corporation (if known))

FILED
2009 NOV -20 PM 3:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

OMEGA BUSINESS SOLUTIONS IV, INC.

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**)

199 Avenue K, SE

Winter Haven, FL 33881

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

199 Avenue K, SE

Winter Haven, FL 33881

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:

John Dial

New Registered Office Address:

199 Avenue K, SE

(Florida street address)

Winter Haven

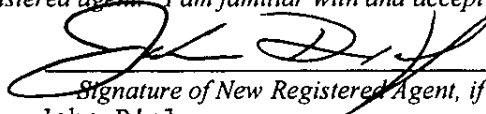
(City)

, Florida 33881

(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
John Dial

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> |
|--------------|-----------------|--------------------------------------------|----------------------------------------------------------------------------|
| P/D | Marvin R. Dial | 199 Avenue K, SE Winter Haven, FL 33881 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| VP/D | William A. Boyd | 199 Avenue K, SE Winter Haven, FL 33881 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| S/T | John W. Dial | 199 Avenue K, SE Winter Haven, FL 33881 | <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)

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: 11-19-09
(date of adoption is required)

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):*

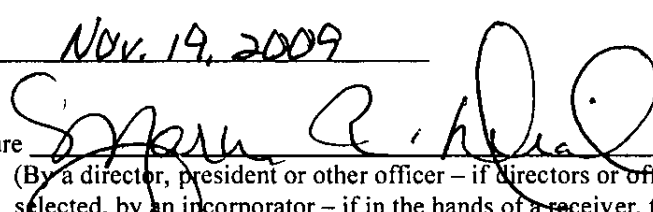
"The number of votes cast for the amendment(s) was/were sufficient for approval

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 Nov. 19, 2009

Signature 
(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)

Marvin R. Dial

(Typed or printed name of person signing)

President

(Title of person signing)