P04DD028139

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Amend 1a 11. H. 14

COVER LETTER

TO: Amendment Section Division of Corporations			
NAME OF CORPORATION: 911 Store Inc. DOCUMENT NUMBER: P0400028139			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
WALTER PHILBRICK			
Name of Contact Person 911 STORE INC.			
Firm/ Company 2231 HOLLYWOOD BLVD			
2231 HOLLYWOOD BLVD Address HOLLYWOOD, FT 33020 City/ State and Zip Code			
FL911570 RE @ AOL, COM E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
WALTER PHILBRICK at , 984, 895-4641			
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 Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (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			

Payable to: Divición of Corporations

Articles of Amendment Articles of Incorporation of

911 STORE INC.
(Name of Corporation as currently filed with the Florida Dept. of State)
P0400028139
(Document Number of Corporation (if known)

P0400028		
(Document Number of Corporation	n (11 known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment	nt(s
A. If amending name, enter the new name of the corporation:	<u>.</u>	
	The new	
name must be distinguishable and contain the word "corpora" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered," "professional association," or the abbreviation	r "Co". A professional corporation name must contain the	
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)		
(Maining dualess MATT BEAT OF THEE BOA)		
		22
D. If amending the registered agent and/or registered office as new registered agent and/or the new registered office addr		GE.
new registered agent and/or the new registered office addr	ess:	- 3
Name of New Registered Agent	· · · · · · · · · · · · · · · · · · ·	j?
		34
(Florida	street address)	
Non-Parisonal Office Addition	ω (
New Registered Office Address: (C	, Florida (Zip Code)	. ,
1		
New Registered Agent's Signature, if changing Registered Age	ent:	
I hereby accept the appointment as registered agent. I am familio	ar with and accept the obligations of the position.	
Signature of New Registere	ed Agent, if changing	

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

mike Jones, r as Remo	re, and suny sinn	n, Sr us an Auu.	
Example: X Change	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
<u>X</u> Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V.P.	X JUAN JOSE RENDON SR.	+ 2231 Hollywood Blue Hollywood, FL 33020
Add	<u>.1,1</u>	RENDON SR.	Hollyword, FL
Remove			33020
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	·
<u> </u>	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and and it is not contained in the amendment itself:
(if not applicable, indicate N/A)	nament it not contained in the attendment reserv
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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	
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)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	