P04000028717

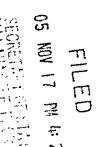
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



800061473108

NC Tileurs



11/17/05--01028--025 ***35.00

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: K&Edux	ards Inc	
DOCUMENT NUMBER: PO 40000 28	2717	
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
Kenneth O Edub (Name of C	ontact Person)	
(Firm/ C	Company)	
8731 Cathriar Bac	dress)	
ORLando PL 328 (City/State	29 and Zip Code)	
For further information concerning this matter, ple	ase call:	
Kenneth Edwards (Name of Contact Person)	_ at (<u>Ho 7</u>) <u>282 - 29</u> (Area Code & Daytime T	Call -32- 407- 3 76-3549 elephone Number)
Enclosed is a check for the following amount:		
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations	Street Address Amendment Section Division of Corporations	

Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 7, 2005

KENNETH O. EDWARDS 8731 CATBRIAR BAY WAY ORLANDO, FL 32829

SUBJECT: K & EDWARDS INC Ref. Number: P04000028717

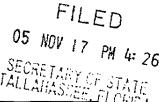
We have received your document for K & EDWARDS INC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$35.00.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Letter Number: 505A00066439

Thelma Lewis
Document Specialist Supervisor

Articles of Amendment to Articles of Incorporation of



K X	THUD IN THE		TLOFIL
	(Name of corporation as	s currently filed with the Florida Dept. of Sta	te)
(\supset		
•	1785000HU	7	
	(Document	number of corporation (if known)	
		1006, Florida Statutes, this <i>Florida P</i> Articles of Incorporation:	rofit Corporation
NEW CORPORA	TE NAME (if changing	<u>ng):</u>	
Kand Ed	Juneds Inc		
Must contain the word A professional corpor	d "corporation," "company," ration must contain the word	or "incorporated" or the abbreviation "Corp 1 "chartered", "professional association," or t	he abbreviation "P.A.")
		R THAN NAME CHANGE) Indicated ded or deleted: (<u>BE SPECIFIC</u>)	Article Number(s)
-			
	<u></u>		
	<u> </u>		
	(Attach	additional pages if necessary)	
		reclassification, or cancellation of issuentained in the amendment itself: (if no	
			·
	_		

(continued)

The date of each amendment(s) adoption: 10-26-05
Effective date if applicable: (no more than 90 days after amendment file date)
(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 (Byf) 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) Tackly Laures (Typed or printed name of person signing)
(Title of person signing)

FILING FEE: \$35