P04000040765

| (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: | |
| | |
| | |
| | |
| | |
| | |
| | |
| | l |

Office Use Only



200159158022

08/03/09--01022--014 **35.00

JIVISION OF CORPORATIONS

09 AUG 12 PM 1: 1.5

Anend + N.C. C.COULLIETTE

AUG 1.2 2009

EXAMINER

COVER LETTER

TO: Amendment Section

Division of Corporations

| NAME OF COR | PORATION: | MOVING MATTERS IN | IC |
|----------------------|--|--|---|
| DOCUMENT NU | JMBER: | P04000040765 | - |
| The enclosed Artic | cles of Amendment and fee a | are submitted for filing. | |
| Please return all co | orrespondence concerning th | is matter to the following: | |
| | ···· | ERRI F. RICKMAN | **** |
| | 7 | Name of Contact Person | |
| | TER | RRI F. RICKMAN, PA | |
| | | Firm/ Company | |
| | | 717 7TH LANE | |
| | | Address | |
| | GRE | ENACRES, FL 33463 | |
| | C | ity/ State and Zip Code | · · · |
| | TRICKMA E-mail address: (to be use | N2375@AOL.COM d for future annual report notification) | |
| For further inform | ation concerning this matter, | please call: | |
| T(| ERRI RICKMAN | | 04-3633 |
| Name | e of Contact Person | Area Code & Daytime Tele | ephone Number |
| Enclosed is a chec | k for the following amount n | nade payable to the Florida Depart | ment of State: |
| ☑ \$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) |
| P.O. Box 6 | nt Section f Corporations | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl | e |

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 6, 2009

TERRI F. RICKMAN 717 7TH LANE GREENACRES, FL 33463

SUBJECT: MOVING MATTERS INC

Ref. Number: P04000040765

We have received your document for MOVING MATTERS INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

When changing the name of a corporation filed pursuant to chapter 607, Florida Statutes, to that of a professional service corporation filed pursuant to chapter 621, Florida Statutes, the specific business purpose must also be added or changed to indicate what type of professional service the corporation will be rendering.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 309A00026893

Articles of Amendment to Articles of Incorporation of

| | MOVING MATTERS INC |
|--------------|---|
| <u>. بعد</u> | me of Corporation as currently filed with the Florida Dept. of State) |
| | P04000040765 |
| <u> </u> | (Document Number of Corporation (if known) |
| | |

| If amending name, enter the new name of | | | |
|--|------------------------------|-------------------------|--------------|
| | RICKMAN, P.A. | | The n |
| me must be distinguishable and contain the obreviation "Corp.," "Inc.," or Co.," or the ome must contain the word "chartered," "profe | designation "Corp," "Inc," c | or "Co". A professional | |
| Enter new principal office address, if appli | icable: | | |
| rincipal office address <u>MUST BE A STREET</u> | <u>"ADDRESS"</u>) | | 0 |
| | | | OO AUG |
| | | | _ ଜ |
| | | | 2 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | | ð |
| Millianing managed to the control of | | | - |
| | · | | 5 |
| | | | |
| If amending the registered agent and/or re | | orida, enter the name o | f the |
| new registered agent and/or the new regist | ered office address: | | |
| Name of New Registered Agent: | | | |
| | | | • |
| New Registered Office Address: | (Florida street addı | ress) | |
| | | , Florida | |
| - | (City) | (Zip Code) | |
| | g Registered Agent: | | |

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) Title Address Type of Action <u>Name</u> ☐ Add [] Remove ☐ Add □ Remove ☐ Add ☑ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) ARTICLE III - NATURE AND PURPOSE OF BUSINESS IS REAL ESTATE 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 | t(s) adoption: JUNE 9, 2009 |
|--|---|
| Effective date <u>if applicable</u> : | (date of adoption is required) |
| Enective date <u>ii applicable</u> : | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/we by the shareholders was/we | ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval. |
| | ere approved by the shareholders through voting groups. The following statement and 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) |
| action was not required. | re adopted by the board of directors without shareholder action and shareholder action and shareholder action and shareholder action and shareholder |
| Dated_AUG | GUST 10, 2009 |
| sele | a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) |
| | TERRI F. RICKMAN |
| | (Typed or printed name of person signing) |
| | PRESIDENT |
| | (Title of person signing) |