P04000041007

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SECRETARY OF STATE

Aprend Mc Neuro 8-11-10

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Nicole Nadine Skaggs PA P04000041007 DOCUMENT NUMBER: _____ The enclosed *Articles of Amendment* and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Nicole Skaggs Name of Contact Person Nicole Nadine Skaggs PA Firm/ Company 7603 9TH AVE DRIVE NW Address **BRADENTON FL 34209** City/ State and Zip Code teamparadise1@verizon.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Nicole Skaggs Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **✓** \$35 Filing Fee ☐ \$43.75 Filing Fee & ■ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section **Division of Corporations Division of Corporations**

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

2010 AUG 11 AM 8: 00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

August 6, 2010

NICOLE SKAGGS NICOLE NADINE SKAGGS PA 7603 9TH AVE. DRIVE N.W. BRADENTON, FL 34209

SUBJECT: NICOLE NADINE SKAGGS, P.A.

Ref. Number: P04000041007

We have received your document 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):

The date of adoption of each amendment must be included in the document.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L05000114751.

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) 245-6906.

Darlene Connell Regulatory Specialist II

Letter Number: 510A00018943

www.sunbiz.org

Just harry & Shapp

Articles of Amendment to Articles of Incorporation

• •	of		FIL
,	Nicole Nadine Skag	gs , PA.	FILEL
<u>(N</u>	lame of Corporation as currently filed with		e) 2010 Alls.
•	P04000041007		SECRETARY OF STATE
	(Document Number of Corpora	tion (if known)	AHASSE OF ST.
Pursuant to the pamendment(s) to	provisions of section 607,1006, Florida Statuits Articles of Incorporation:	ites, this <i>Florida Profit C</i>	Corporation adopts the follow
A. If amending	name, enter the new name of the corporation	on:	
			U Estate, Inc.
abbreviation "Ca	distinguishable and contain the word "cororp.," "Inc.," or Co.," or the designation "Cin the word "chartered," "professional associ	poration," "company," c Corp," "Inc," or "Co". A	or "incorporated" or the professional corporation
	rincipal office address, if applicable: address <u>MUST BE A STREET ADDRESS</u>)	53 86 Bulf Holmes Bea	ch, Fl. 34217
	nailing address, if applicable: ress <u>MAY BE A POST OFFICE BOX</u>)	:	
	the registered agent and/or registered officeed agent and/or the new registered office ad		er the name of the
Name of	New Registered Agent:		-
<u>New Regi</u>	stered Office Address: (Flor	ida street address)	-
			Elorida

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.

(City)

Signature of New Registered Agent, if changing

(Zip Code)

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) 1 . 1% 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) 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:		8/2/10
• Effective date <u>if applicable</u> : _		adoption is required)	8/9/10
- · · •	(no more than 90 days after	amendment file date	·)
gr. in			
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/wer		rs. The number of vo	otes cast for the amendment(s)
The amendment(s) was/were must be separately provided			
"The number of votes ea	ist for the amendment(s) wa	is/were sufficient for	approval
by		**	
(voting group)		
The amendment(s) was/were action was not required.	adopted by the board of di	rectors without share	holder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporate	ors without sharehold	er action and shareholder
Dated 8	9/10		
Signature	(xol)	aggs -	~
	director, president or other		s or officers have not been eiver, trustee, or other court
	nted fiduciary by that fiduc		aret, trustoc, or other court
	Nic	cole Skaggs	
		ed name of person si	gning)
		President	
	(Title of person sig	ning)	