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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: MELINDA CREEL, IN	NC.	
DOCUMENT NUMBER: P04000041794		
The enclosed <b>Articles of Amendment</b> and fee are	e submitted for filing.	
Please return all correspondence concerning this r	matter to the following:	
MELINDA ODEEL		
MELINDA CREEL (Name	of Contact Person)	· <u></u>
MELINDA CREEL, INC.	irm/ Company)	
,		
10615 WITTENBERG WAY		
	(Address)	
0.51 11150 51 00000		
ORLANDO, FL 32832 (City/ S	State and Zip Code)	·
For further information concerning this matter, plea	ase call:	
	,	
MELINDA CREEL	at <u>(321) 663-6151</u>	
(Name of Contact Person)	(Area Code 8	& Daytime Telephone Number)
Enclosed is a check for the following amount made	e payable to the Florida Departm	ent of State:
	, , , , , , , , , , , , , , , , , , , ,	
35 Filing Fee \$\ \tag{\$43.75 Filing Fee & Certificate of Status}	\$43.75 Filing Fee & Certified Copy	\$52.50 Filing Fee Certificate of Status
	(Additional copy is	Certified Copy
	enclosed)	(Additional Copy is enclosed)
Malling Address	Street Address	

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ATX1

## Articles of Amendment to Articles of Incorporation

<b>V</b> 1	THE PARTY OF THE P
MELINDA RUTKOSKY, INC.	ج <i>ن</i> ≪ <u>~∞ت</u>
(Name of Corporation as currently filed with the Florida Dept. of State)	
P04000041794	
(Document Number of Corporation (if known)	· ·

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

Α.	If amending name, enter the new name of	of the corporation:			
ME	LINDA CREEL, INC.				
"ind	e new name must be distinguishable and co corporated" or the abbreviation "Corp.," "Inc o". A professional corporation name must co sociation," or the abbreviation "P.A."	.," or Co.," or the designation "C	orp," "Inc," or		
	Enter new principal office address, if ap incipal office address MUST BE A STRE				
C.	Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)				
D.	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:	MELINDA CREEL			
	New Registered Office Address:	(Florida street address	5)		
			, Florida		
		(City)	(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

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)

Titl	<b>e</b>	Name	Address	Type of Action	
PRE	<u>s</u>	MELINDA CREEL	(NAME CHANGE)	Add Remove	
···	<del></del>			Add Remove	
				Add Remove	
E.	_	or adding additional Articles, enter chartional sheets, if necessary). (Be specific)	ige(s) here:		
F.	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)				
		· <u>· · · · · · · · · · · · · · · · · · </u>			
			. <u> </u>		
	<del></del>				

М	ELINDA CREEL, INC.				20-0874012	ATX <sup>2</sup>
The date of each amendment(s) adoption:		t(s) adoption:		1/1/2011		
Effe	ctive date if applicable:					
		(no more than 90 d	days after amendmen	t file date)		
Ado	ption of Amendment(s)	(CHEC	K ONE)			
	The amendment(s) was/s by the shareholders was/			ımber of votes cast f	for the amendme	∍nt(s)
	The amendment(s) was/w must be separately provide					ent
	"The number of vot	es cast for the amen	dment(s) was/were s	ufficient for approva	ıl	
	by	, <u></u>		. н		
		(voting group)				
	The amendment(s) was/Naction was not required.	vere adopted by the	board of directors wit	hout shareholder ac	tion and shareho	older
X	The amendment(s) was/vaction was not required.	vere adopted by the	incorporators without	shareholder action	and shareholder	
	Dated	1/3/201	1			
	Signature	Mynn	that or other officer – if di	Actor or officers how	not boon	
		• •	orator – if in the hands			
		MELINDA CREEL				
		(Тур	ed or printed name of	person signing)		
		PRESIDENT			<del> </del>	
			(Title of person s	signing)		