

P04000046221

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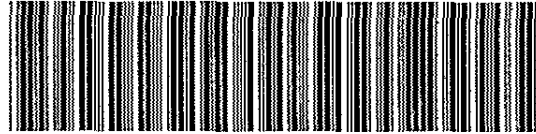
(Business Entity Name)

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06 SEP - 1 PM 12:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 9/5/06  
WZ

**COVER LETTER**

**TO: Amendment Section**  
Division of Corporations

**NAME OF CORPORATION** LISA E CLAIBORNE ENTERPRISES INC,  
DBA HITCH\_ARTS

**DOCUMENT NUMBER:** PO 4000046221

The enclosed ***Articles of Amendment*** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LISA E CLAIBORNE  
(Name of contact person)

N/A  
(Firm/Company)

14700 BALD EAGLE DRIVE  
(Address)

FT MYERS, FLORIDA 33912  
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

LEONA J RAY (954) 792-0363  
(Name of contact person) (Area code & daytime telephone 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)	<b>XX 52.50 filing fee</b> Certificate of status Certified copy (Additional copy is enclosed)
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Articles of Amendment  
to  
Articles of Incorporation  
of

**FILED**  
06 SEP -1 PM 12:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**LISA E CLAIBORNE ENTERPRISES INC**

(Name of corporation as currently filed with the Florida Dept. of State)

**PO 4000046221**

(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:

**NEW CORPORATE NAME (if changing):**

**HITCH-ARTS INC**

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered," "professional Association," or the abbreviation "P.A.")

**AMENDMENTS ADOPTED - (OTHER THAN NAME CHANGE) Indicate article number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)**

**ARTICLE VI - OFFICERS OF CORPORATION**

**DELETE TITLE, NAME AND ADDRESS OF THE FOLLOWING:**

**TITLE - VICE-PRESIDENT**

**LISA E CLAIBORNE**

**14700 BALD EAGLE DRIVE**

**FT MYERS, FLORIDA 33912**

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, of cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

N/A

(continued)

Effective date if applicable: \_\_\_\_\_ JUNE 01, 2006

**Adoption of Amendment(s) (CHECK ONE)**


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.

**X The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.**

Signed this 5 day of August 2006

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)

**PRESTON FIRESTEIN**

(Typed or printed name of person signing)

**PRESIDENT**

(Title of person signing)

Signature *Dora E. Claiborne 6/3/06*  
(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)

**LISA E CLAIBORNE**

(Typed or printed name of person signing)

**VICE-PRESIDENT**

(Title of person signing)