## P04000053547

(Re	equestor's Name)	
(Ad	dress)	
(A.)		
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	Ţ
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## TRANSMITTAL LETTER

. TO: Amendment Section

**Division of Corporations** 

Tallahassee, FL 32314

SUBJECT: Amendment to Articles Of Incorporation DOCUMENT NUMBER: P04000053547 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: M. Barry Copenhaver (Name of Person) Barry Copenhaver, Inc. (Name of Firm/ Company) 1809 Wekiwa Drive (Address) Apopka, Florida 32712 (City/ State/ and Zip Code) For further information concerning this matter, please call: at (407 Betty-Anne Mann ) 880-0337 (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for the following amount: ☐ \$43.75 Filing Fee & □ \$35 Filing Fee ☐ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 409 E. Gaines Street

Tallahassee, FL 32399

## Articles of Amendment to Articles of Incorporation of

M. <u>Ba</u> i	rry Copenhaver, Inc.
	corporation as currently filed with the Florida Dept. of State)
	≥ <b>= 1</b>
	3547 AHAS: 38
P0400005	
	(Document number of corporation (if known)
Pursuant to the provisions of se	ection 607.1006, Florida Statutes, this Florida Profit Corporation
adopts the following amendmen	nt(s) to its Articles of Incorporation:
	Ď
NEW CORPORATE NAME	(if changing):
	and the second s
(must contain the word "corporation	n," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
	- (OTHER THAN NAME CHANGE) Indicate Article Number(s)
and/or Article Title(s) being am	nended, added or deleted: (BE SPECIFIC)
<u> Article VII - Name A</u>	<u>And Address of Directors/Officers- Amended</u> as Follo
The Name/Title and A	Addresses of the Officers/Directors of the
Corporations, who s	hall hold office the first year or until their
successors are duly	elected and qualified shall be:
M. Barry Copenhaver	Director/President 1809 Wekiwa Drive
	Treasurer
	Apopka, FL 32712
Betty-Anne Mann	Director/Vice President 1809 Wekiwa Drive
	Secretary
	- Apopka, FL 32712
	in the second se
	(Attach additional pages if necessary)
	• •
If an amendment provides for ex	xchange, reclassification, or cancellation of issued shares, provisions
for implementing the amendmen	nt if not contained in the amendment itself: (if not applicable, indicate N/A)
•	• • • •
	<u> </u>
	<u>and the second of the second </u>

(continued)

The date of each amendment(s) adoption: June 24, 2004	- <b>4</b> v'
Effective date if applicable: June 24, 2004	272 4. 4
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	2 <del>5 - 2</del>
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.	
Signed this 24th day of June 2004	 . —
Simon M. D. (Solar	- <del>1</del>
Signature (By a director, president or other officer - if directors or officers have not been	
selected, by arr incorporator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
M. Barry Copenhaver	
(Typed or printed name of person signing)	
Director/President	
(Title of person signing)	

FILING FEE: \$35