

P04000055361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

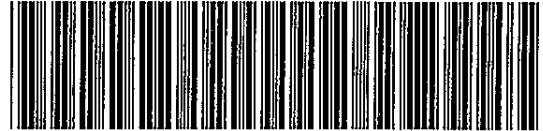
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04 APR 15 AM 9:56

CLERK OF STATE
TALLAHASSEE, FLORIDA

P041000055361
Or
Amend 4-15-04
588

14 April 2004

MEMORANDUM TO: State Department of Education
Division of Corporations, Amendment Section

FROM: Angeline B. O'Bryant, TUO FREENDS INC.
P.O. Box 62115
Jacksonville, FL 32208

RE: Amendment

Attached are completed forms for amendment along with a check for the designated amount.

Please contact me for additional information.

Thank you for your assistance with this request.

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Additional Officer

DOCUMENT NUMBER: P04000055361

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

Please return all correspondence concerning this matter to the following:

ANGELINE B. O'BRYANT
(Name of Person)

TWO FRIENDS INC
(Name of Firm/ Company)

5712 FINCH AVE
(Address)

JACKSONVILLE, FL 32219
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

ANGELINE B. O'BRYANT at (904) 924-9328
(Name of 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)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

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

Street Address
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Articles of Amendment
to
Articles of Incorporation
of

TWO FRIENDS, INC.

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

PO4000055361

(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):

(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

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

Additional Officer: ARTICLE V:

Mr. Van B. Lewis, Jr - Secretary/Treasurer

P.O. Box 1657

MIDDLEBURG, FL 32068

SECRETARY OF STATE
ALLAHAMSSSE, FLORIDA

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(Attach additional pages if necessary)

If an amendment provides for 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)

(continued)

The date of each amendment(s) adoption: April 12, 2004

Effective date if applicable: April 12, 2004
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☐ 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 14 day of April 2004

Signature

Angeline B. O'Bryant
(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)

ANGELINE B. O'BRYANT
(Typed or printed name of person signing)

Director & President
(Title of person signing)

FILING FEE: \$35