## P04000064969

| (Requestor's Name)                      |   |
|---|---|
| (Address)                               |   |
| (Address)                               |   |
| (City/State/Zip/Phone #)                |   |
| PICK-UP WAIT MAIL                       |   |
| (Business Entity Name)                  | • |
| (Document Number)                       |   |
| Certified Copies Certificates of Status |   |
| Special Instructions to Filing Officer: |   |
|   |   |
|   |   |
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Office Use Only



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ECRETARY OF STATE LLAHASSEE, FLORIO

FILED



September 22, 2009

ROBERT JOYCE JOYCE ENTERPRIZES OF AMERICA 1900 W NEW HAMPSHIRE ST ORLANDO, FL 32804

SUBJECT: JOYCE ENTERPRIZES OF AMERICA INC.

Ref. Number: P04000064969

We have received your document for JOYCE ENTERPRIZES OF AMERICA INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Todd Henning must sign form below in the space provided. If he is not available you can file an amendment form.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6892.

Letter Number: 809A00030997

Tina Roberts
Regulatory Specialist II

Division of Corporations - P.O. ROY 6327 - Tallahassaa, Florida 32314

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORI                         | PORATION: Toyer                              | ENTERPRIZES 03<br>D/B/A Recise 7                                  | America  |         |
|--------------------------------------|--|---|--|---------|
| MANUE OF COR                         | ORTHON. Voyee                                | DIBLA Arecise 7   | RANSPORTATION  | Service |
| DOCUMENT NU                          | MBER: <u>P040</u>                            | 00064969  |  |         |
| The enclosed Artic                   | eles of Amendment and fee a                  | are submitted for filing.   |  |         |
| Please return all co                 | orrespondence concerning th                  | is matter to the following:                                       |  |         |
|                                      | Moben  | Name of Contact Person  |  |         |
|                                      |  | Firm/ Company   |  |         |
|                                      | 1900 W.                                      | New Hampshin  | <u>u</u>   |         |
|                                      | OR/AWDO                                      | FC 32804<br>Citý/ State and Zip Code                              |  |         |
|                                      | E-mail address: (to be use                   | Imouns, B12<br>d for future annual report notification)           |  |         |
| For further information              | ation concerning this matter,                | please call:  |  |         |
| . Nobent                             | of Contact Person                            | at ( <u>32/</u> ) <u>388 – 6</u><br>Area Code & Daytime Tele      | 722<br>ephone Number   |         |
| Enclosed is a chec                   | k for the following amount n                 | nade payable to the Florida Depart                                | ment of State:   |         |
| □ \$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 en | closed) |
| Mailing A<br>Amendmer<br>Division of |  | Street Address Amendment Section Division of Corporations         |  |         |

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

## **Articles of Amendment**

|   | to  |
|---|---|
| Article   | s of Incorporation $Q_0 = \mathcal{E}_{\mathcal{E}_0}$  |
|   | of "OC"   |
| Journal Follows   | es of America Tive Pyleo, of State)   |
| (Name of Corporation as currently fi  | led with the Floride Dant of Store  |
| (Name of Corporation as currently in  | led with the Florida Dept. of State   |
|   | ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~   |
| (Document Number of   | Corporation (if known)  |
| Pursuant to the provisions of section 607.1006, Flori amendment(s) to its Articles of Incorporation:  | ida Statutes, this Florida Profit Corporation adopts the following  |
| A. If amending name, enter the new name of the co   | rporation:  |
| NA  | The new   |
|   | rd "corporation," "company," or "incorporated" or the eation "Corp," "Inc," or "Co". A professional corporation |
| D. Francisco de la constitución |   |
| B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD   |   |
| (Tincipal office address MOST BE A STREET ADD   | <u> </u>  |
|   |   |
|   |   |
|   | /   |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.  | $\nu$ $\omega/A$  |
| (Mulling duaress MAT BE A TOST OF TICE BO.  | <u></u>   |
|   |   |
|   |   |
| D. If amending the registered agent and/or register   | ed office address in Florida, enter the name of the   |

D. <u>If</u> new registered agent and/or the new registered office address:

| Name of New Registered Agent:  | NA                | <u> </u>   |
|--------------------------------|-------------------|------------|
| New Registered Office Address: | (Florida street d | address)   |
|                                |                   | , 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)

| <u>Title</u>              | <u>Name</u>  | Address                                    | Type of Action    |
|---------------------------|--|--|-------------------|
| V.P.                      | TODA HENNING   | 100 S, HAMPTON AVE<br>ONLANDO, FL<br>32803 | Add Remove        |
|                           |  |  | ☐ Add<br>☐ Remove |
|                           |  |  | ☐ Add<br>☐ Remove |
| E. If amendir (attach add | ng or adding additional Articles, enter clitional sheets, if necessary). (Be specific                  | hange(s) here:                             |                   |
| provision                 | ndment provides for an exchange, reclass for implementing the amendment if neapplicable, indicate N/A) |  |                   |
|                           | $\mathcal{N}/\mathcal{N}$  | 7  |                   |
|                           |  |  |                   |
|                           |  |  |                   |

| The date of each amendment(s                          | adoption: 6/26/09  |
|---|--|
| Effective date <u>if applicable</u> : _               | (date of adoption is required)   |
|   | (no more than 90 days after amendment file date)   |
| Adoption of Amendment(s)                              | (CHECK ONE)  |
| The amendment(s) was/were by the shareholders was/wer | e adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.  |
|   | e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):             |
| "The number of votes ca                               | ast for the amendment(s) was/were sufficient for approval  |
| by  | (voting group)   |
| (   | (voting group)   |
| The amendment(s) was/were action was not required.    | e adopted by the board of directors without shareholder action and shareholder   |
| The amendment(s) was/were action was not required.    | adopted by the incorporators without shareholder action and shareholder  |
| Dated   | 6/26/09  |
|   | a director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court |
|   | inted fiduciary by that fiduciary)   |
|   | Robert Jores   |
|   | (Typed or printed name of person signing)  |
|   | MesiDeNT   |
| •   | (Title of person signing)  |