

P04000068458

BANKS

4235 VILLAGE DR

SUITE D

DELRAY BEACH, FL 33445

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800034688838

05/03/04--01040--013 **43.75

SECRETARY OF STATE
TALLAHASSEE, FL 32399

04 MAY 21 PM 3:19

FILED

5/25

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NAME CHANGE

DOCUMENT NUMBER: P 04000068458

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

Please return all correspondence concerning this matter to the following:

STEVEN L. BANKS SR.
(Name of Person)

(Name of Firm/ Company)

4235 VILLAGE DRIVE
(Address)

SUITE D
DELRAY BEACH, FL 33445
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

STEVEN L. BANKS at (561) 865-9082
(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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 8, 2004

STEVEN L. BANKS SR.
4235 VILLAGE DRIVE, STE D
DELRAY BEACH, FL 33445

SUBJECT: S & R PAIN SOLUTIONS, INC.
Ref. Number: P04000068458

We have received your document for S & R PAIN SOLUTIONS, INC. and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6908.

Anna Chesnut
Document Specialist

Letter Number: 504A00031932

RECEIVED

04 MAY 21 AM 7:21

DIVISION OF CORPORATIONS

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

Articles of Amendment
to
Articles of Incorporation
S&R PAID SOLUTIONS, Inc.

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

P 040000 68458

(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):

SOLITARY SOLUTIONS, INC

(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)**

(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)

FILED
04 MAY 21 PM 3:19
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

The date of each amendment(s) adoption: 4-27-04

Effective date if applicable: _____
(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 27 day of April, 2004.

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)

STEVEN L. BANKS

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE: \$35