## P04000072451

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(Address)					
(City/State/Zip/Phone #)					
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SECRETARY OF STATE

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF C	ORPORATION:	Tabl	e Four In	<u>c</u> .			
DOCUMENT	NUMBER:	P040000	72451				
The enclosed	Articles of Amendi	nent and fee are su	abmitted for filing.				
Please return a	all correspondence	concerning this ma	atter to the following:				
		LiAn Swa (Name of Co	unson Lussia ontact Person)	e r			
		Table f	our Inc.				
	2750	Orchid (Add	Oaks Dr.	<del> </del>			
	Sa		FL 3423	39			
(City/ State/ and Zip Code)  For further information concerning this matter, please call:							
LiAn	Swanson (Name of Contact Pers	ussier m)	at ( 941 ) 52 (Area Code & Day)	14-6650 time Telephone Number)			
Enclosed is a	check for the follow	wing amount:					
☐ \$35 Filing Fee		ling Fee & te of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	X \$52.50 Filing Fee Certificate of Statu Certified Copy (Additional Copy is enclosed)			
	Mailing Address Amendment Section Division of Corpo P.O. Box 6327 Tallahassee, FL 3	on orations	Street Addres Amendment Se Division of Co 409 E. Gaines Tallahassee, Fl	ection rporations Street			

## Articles of Amendment to Articles of Incorporation of

	Table four Incorporated							
	(Name of corporation as currently filed with the Florida Dept. of State)							
	P04000072451 PS							
	(Document number of corporation (if known)							
	Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation:							
	NEW CORPORATE NAME (if changing):							
	(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)							
20 F	2 Add - Jon-Paul Lussier as an officer							
	of Table four Incorporated -							
	His title will be "Secretary"							
	Address:							
	2750 Orchid Oaks Dr.							
	Sarasota FL 34239							
	(Attach additional pages if necessary)							
	If an amendment provides for exchange, reclassification, or cancellation of issued shares, provision for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate National Contained in the amendment itself).							

(continued)

The date of each amendment(s) adoption:	12	3	04			
Effective date if applicable: (no more than 90	123 days after ame	64 indime	nt file date)			
Adoption of Amendment(s) (CHEC	K ONE)					
☐ The amendment(s) was/were appro- the amendment(s) by the sharehold						
☐ The amendment(s) was/were approfollowing statement must be 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 adopt and shareholder action was not required the shareholder action was not required shareholder action was not required.	uired. ed by the inc		f directors without shareholder action are factors without shareholder action and			
	or other offices	ر پ <u>وگار ا</u> r - if d	2004  Successive of the state o			
Lian	S. Li	٠S	Sier			
(Typed or printed name of person signing)						
1	Presio	l e	nt			
(Title of person signing)						

FILING FEE: \$35