

PO4000085561

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(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
ATLANTA, GEORGIA

Amend N.C.
C.COULLETTE

JUL 23 2010

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PERFECT CIRCLE HOME AND GARDEN, INC.

DOCUMENT NUMBER: P04000085561

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

Please return all correspondence concerning this matter to the following:

DOROTHY J FLEMMING

Name of Contact Person

Firm/ Company

5674 SE ORANGE BLOSSOM TRAIL

Address

HOBE SOUND, FL 33455

City/ State and Zip Code

DKEFAUVR@BELLSOUTH.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DOROTHY J FLEMMING

Name of Contact Person

at (561)

723-3099

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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 enclosed)

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 13, 2010

DOROTHY J. FLEMING
5674 SW ORANGE BLOMMOM TRAIL
HOBE SOUND, FL 33455

SUBJECT: PERFECT CIRCLE HOME AND GARDEN, INC.
Ref. Number: P04000085561

We have received your document for PERFECT CIRCLE HOME AND GARDEN, INC. and check(s) totaling \$35.00. 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 existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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

The document number of the name conflict is #P98000012496 / THE PERFECT CIRCLE, INC..

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) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 610A00016989

RECEIVED
JUL 23 AM 8:00
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

COVER LETTER

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Division of Corporations

NAME OF CORPORATION: PERFECT CIRCLE HOME AND GARDEN, INC.

DOCUMENT NUMBER: P04000085561

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Address

HOBE SOUND, FL 33455

City/ State and Zip Code

DKEFAUVR@BELLSOUTH.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DOROTHY J FLEMMING

Name of Contact Person

at (772)

463-6754

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
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Division of Corporations
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Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

PERFECT CIRCLE HOME AND GARDEN, INC.

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

P04000085561

(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:

A. If amending name, enter the new name of the corporation:

PERFECT CIRCLE DESIGNS, INC.

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 JUL 23 PM 1:55

FILED

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

DOROTHY J FLEMMING

New Registered Office Address:

5674 SE ORANGE BLOSSOM TRAIL

(Florida street address)

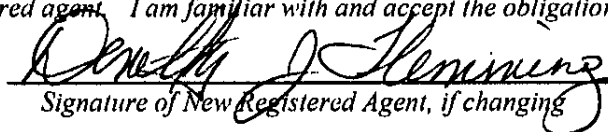
HOBE SOUND

(City)

Florida 33455
(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>	<u>Address</u>	<u>Type of Action</u>
<u>DV</u>	<u>DOROTHY J KEFAUVER</u>	<u>5674 SE ORANGE BLOSSOM TR</u> <u>HOBE SOUND, FL 33455</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>DV</u>	<u>DOROTHY J FLEMMING</u>	<u>5674 SE ORANGE BLOSSOM TR</u> <u>HOBE SOUND, FL 33455</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an 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)

The date of each amendment(s) adoption: JULY 20, 2010

(date of adoption is required)

Effective date if applicable: JULY 20, 2010

(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted 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

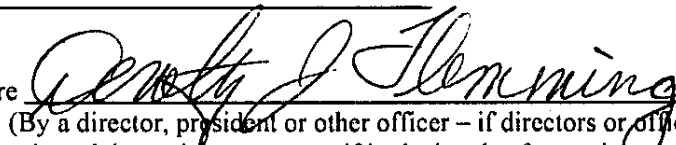
by _____"
(voting group)

☐ 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.

Dated 07/20/2010

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)

DOROTHY J FLEMMING

(Typed or printed name of person signing)

VICE-PRESIDENT

(Title of person signing)