# 000/388<sup>Hage 1 of 1</sup>

# Florida Department of State

Division of Corporations Public Access System

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(((H08000245350 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : ROBERTS, SEWARD & COMPANY PA

Account Number : 120040000178 Phone : (813)225-1040

Fax Number : (813)221-3135

# COR AMND/RESTATE/CORRECT OR O/D RESIGN

ROBERTS, SEWARD & COMPANY FINANCIAL SERVICES, INC.

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October 29, 2008

### FLORIDA DEPARTMENT OF STATE

ROBERTS, SEWARD & COMPANY FINANCIAL SERVICES, INC. 505 E. JACKSON STREET SUITE 202
TAMPA, FL 33602US

SUBJECT: ROBERTS, SEWARD & COMPANY FINANCIAL SERVICES, INC. REF: P04000113884

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6925.

Teresa Brown Regulatory Specialist II FAX Aud. #: H08000245350 Letter Number: 108A00055535

ZOUR OCT 30 AM .8: 00
SECRETARY OF STATE
TAPLIANASSIE: FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314



October 29, 2008

### FLORIDA DEPARTMENT OF STATE

ROBERTS, SEWARD & COMPANY FINANCIAL SERVICES, INC. 505 E. JACKSON STREET

SUITE 202

TAMPA, FL 33602US

SUBJECT: ROBERTS, SEWARD & COMPANY FINANCIAL SERVICES, INC.

REF: P04000113884

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

The date of adoption of each amendment must be included in the document.

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) 245-6925.

Teresa Brown Regulatory Specialist II FAX Aud. #: H08000245350 Letter Number: 008A00055478

P.O BOX 6327 - Tallahassee, Florida 32314

H800007453503

Articles of Amendment to Articles of Incorporation of

	E// ~
2008 OC7	FILED 30 AM 9:48
TALLAHASS	30 AM 9: 48 PY OF STATE EE. FLORIDA
_	FLORIDA

Roberts, Seward & Company Financial Services, Inc.	
(Name of Corporation as currently filed with the Florida Nept, of State)	_ '
P04000113884	_
(Document Number of Corporation (if known)	ш

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 smending game, enter the new name of the corporation: ROBERTS FINANCIAL, INC. The new name must be distinguishable and contain the word "corporation," "company, "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." 1016 CARRIAGE PARK DRIVE B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) VALRICO, FL 38594 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 1016 CARRIAGE PARK DRIVE VALRICO, FL 33594 D. If amending the registered accept and/or registered office address in Florida, autor the name of the new registered agent and/or the new registered office address: PAUL ROBERTS Name of New Registered Agent: 1016 CARRIAGE PARK DRIVE (Florida street address) New Registered Office Address: VALRICO Florida 33584 (CLD) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent

I hereby accept the appointment or registered agent. I am familiar with and accept the obligations of the position

Signature of New Registered Agent, if changing

Page 1 of 3

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If smending 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)

Title	Name	Address	Type of Action
<u>P</u>	JOHN SEWARD		Add Remove
<u> </u>	PAUL ROBERTS	1016 CARRIAGE PARK DRIV VALRICED, FL 33594	Ed Add Remove
			Add Remove
E. [fam.	tending or adding additional Artistas, hadditional sheets, if necessary). (Be	enter champe(e) here: specific)	
	· · · · · · · · · · · · · · · · · · ·		
prov	n amendment provides for an exchange risions for implomenting the amendme if not applicable, indicate N/A)	er reclassification, or cancellation of l of if not contained in the am ordinax	ermed chares, titaelf:
		Vega 2 of 3	

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The date of each amendment(s) adoption: 1-1-08
Effective date if application 1-1-58  (no more than 90 days after amendment file date)
(no more than 90 days after amondment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the altarcholders. The number of votes east for the amendment(s by the shareholders was/were sufficient for approval.
☐ The amountment(s) was/were approved by the shareholders through voting groups. The following statemes must be separately provided for each voting group satisfied to vote separately on the amendment(s):
"The number of votes east for the amendment(s) was Avere sufficient for approval
by
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.
Deted × 10 - 28-08
Signature A Paul R. Profests  (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)
PAUL R. ROBERTS (Typed or printed name of person signing)
PRESIDENT (Title of person signing)

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