

PD4000113907

(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:

Office Use Only



400252566334

400252566334  
10/09/13--01023--001 \*\*35.00

APPROVED  
AND  
FILED  
13 OCT -9 AM 11:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS  
OCT 17 2013  
EXAMINER

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** CFO DIRECT INC

**DOCUMENT NUMBER:** P04000113907

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

Please return all correspondence concerning this matter to the following:

RALPH I HADDAD, CPA

Name of Contact Person

CFO DIRECT INC

Firm/ Company

3320 S.E. 27th AVE

Address

GAINESVILLE, FLORIDA 32641

City/ State and Zip Code

CFODIRECT@YAHOO.COM

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

For further information concerning this matter, please call:

RALPH I HADDAD, CPA at ( 904 ) 450.0878  
Name of Contact Person Area Code & Daytime Telephone Number

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

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>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

APPROVED  
AND  
FILED

13 OCT -9 AM 11:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

CFO DIRECT INC

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

P04000113907

(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:**

*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)

**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 RALPH I HADDAD, CPA  
3320 SE 27TH AVE  
(Florida street address)

New Registered Office Address: GAINESVILLE, Florida 32641  
(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.

RALPH HADDAD CPA  
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)*

*Please note the officer/director title by the first letter of the office title:*

*P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.*

*Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.*

**Example:**

X Change                      PT      John Doe

X Remove                    V      Mike Jones

X Add                        SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>PVST</u>	<u>GEORGE N ABDULNOUR</u>	<u>3320 SE 27TH AVE</u>
<input type="checkbox"/> Add			<u>GAINESVILLE, FL 32641</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>PVST</u>	<u>RALPH I HADDAD, CPA</u>	<u>CFO DIRECT INC</u>
<input checked="" type="checkbox"/> Add			<u>3320 SE 27TH AVE</u>
<input type="checkbox"/> Remove			<u>GAINESVILLE, FL 32641</u>
3) <input type="checkbox"/> Change	<u>D</u>	<u>GEORGE N ABDULNOUR</u>	<u>3320 SE 27TH AVE</u>
<input type="checkbox"/> Add			<u>GAINESVILLE, FL 32641</u>
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>D</u>	<u>RALPH I HADDAD, CPA</u>	<u>CFO DIRECT INC</u>
<input checked="" type="checkbox"/> Add			<u>3320 SE 27TH AVE</u>
<input type="checkbox"/> Remove			<u>GAINESVILLE, FL 32641</u>
5) <input type="checkbox"/> Change	<u>D</u>	<u>GEORGE N ABDULNOUR</u>	<u>3320 SE 27TH AVE</u>
<input checked="" type="checkbox"/> Add			<u>GAINESVILLE, FL 32641</u>
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<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)

(Attach additional sheets, if necessary). (Be specific)

[illegible]

**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)

GEORGE N ABDULNOUR, THE PREVIOUS PVST AND D, HAS SOLD 100% OF  
CFO DIRECT INC SHARES, TO RALPH I HADDAD, CPA, WHO IS NOW THE  
NEW PVST AND D, AS WELL AS THE SOLE OWNER OF THE SHARES.

RALPH I HADDAD NOW OWNS 100% OF THE COMPANY SHARES.  
GEORGE N ABDULNOUR IS NOW A DIRECTOR ONLY, HOLDING THE  
POSITION OF CFO. HE DOES NOT OWN ANY OF THE SHARES.

The date of each amendment(s) adoption: OCTOBER 3 2013  
date this document was signed.

Effective date if applicable: OCTOBER 3 2013  
(no more than 90 days after amendment file date)

APPROVED  
AND  
FILED  
13 OCT -9 AM 11:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 OCTOBER 3 2013

Signature

RALPH HADDAD CPA

(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)

RALPH I HADDAD, CPA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)