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SECRETARY OF STATE
TALLAHASSEF FINANCE

to day on

COVER LETTER

Division of C	Section Corporations		
NAME OF COR	PORATION: Julie	Walbroel, P.A.	At a second visit a second visit as
DOCUMENT N	umber: <u></u> 704000	ජීපීපිට 11	
The enclosed Arts	icles of Amendment and fee a	re submitted for filing.	
Please return all o	correspondence concerning thi	s matter to the following:	
	Julie v	Jalbroel	
	N	ame of Contact Person	
	Julie W	albroel, P.A.	
		Firm/ Company	
	1030 North org	nge Avenue. Suit	e gio
		Address	
	orlando, Flo	10868 66170	
		ity/ State and Zip Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in squi	mos be @ybn	
_	•	d for future annual report notification	
For further inform	nation concerning this matter,	please call:	
Julie V	Valproel	-020 FOH	0075
	e of Contact Person	at (<u>407</u>) <u>650</u> Area Code & Daytime 1	Celephone Number
Enclosed is a chec	ck for the following amount m	ade payable to the Florida Dep	artment of State:
\$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ent Section of Corporations	Street Address Amendment Section Division of Corporations Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Cir Tallahassee, FL 32301	rcle

Articles of Amendment to Articles of Incorporation of

ordieW silut	el-Pardy. F	?. A .	
(Name of Corporation as curren	tly filed with the Florid	da Dept. of State)	
P04000	ABBN11		
	per of Corporation (if kno	own)	
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this F	Florida Profit Corporation adopts the i	following
A. If amending name, enter the new name of t	the corporation:		
Julie Walbroel	1. A.F.	The n	ew
name must be distinguishable and contain th abbreviation "Corp.," "Inc.," or Co.," or the a name must contain the word "chartered," "profe	lesignation "Corp," "In	"company," or "incorporated" or incorporated o	he
B. Enter new principal office address, if application (Principal office address MUST BE A STREET)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE D. If amending the registered agent and/or renew registered agent and/or the new registered.)	gistered office address	SECHETARY OF STATE ALLAHASSEE, IL ORIGINAL IN Florida, enter the name of the state	FILED
Name of New Registered Agent:	orea office nauress.		
New Registered Office Address:	(Florida street	address)	
_		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agentials.			n .

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) Title Name Address Type of Action Add Remove Add Remove Add Remove L. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

₹. If a	n amendment provides for an exchange, reclassification, or cancellation of issued shares,
pro	visions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
	NIA

The date of each amendment(s	adoption: $9/21/10$
•	(date of adoption is required)
Effective date <u>if applicable</u> :	no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	95
ń	voting group) ."
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated 09	191/10
Signature	Caerdeoluises
	directed president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court
	nted fiduciary by that fiduciary)
	JulieWalbroel
	(Typed or printed name of person signing)
	President
	(Title of person signing)