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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	DRATION:	LONGO ENTERPRISES	INC
DOCUMENT NUMBER:		P04000130291	· · ·
The enclosed Article	s of Amendment and fee a	re submitted for filing.	•
Please return all corr	espondence concerning thi	is matter to the following:	
		DOLI DAVY	
·	N	lame of Contact Person	
	DOLI'S ACC	COUNTING SERVICES INC.	
_		Firm/ Company	
•	3020	49TH STREET NORT	
_		Address	•
			•
<u></u>		ETERSBURG, FL. 33710	•
•	C	ity/ State and Zip Code	1 1
	DOLIDALE@	TAMPABAY.RR.COM	
	E-mail address: (to be use	d for future annual report notification)	•
For further informati	on concerning this matter,	please call:	
Г	OOLI DAVY	at (727) 55	20-1980
Name of	Contact Person	Area Code & Daytime Tel	ephone Number
Enclosed is a check f	for the following amount m	nade payable to the Florida Depart	tment 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 Add Amendment! Division of C P.O. Box 632 Tallahassee, I	Section Corporations 27	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl Tallahassee, FL 32301	e

Articles of Amendment to Articles of Incorporation of

LONGO E	ENTERPRISES, INC.		
(Name of Corporation as cur	rently filed with the Florida	Dept. of State) /o'`
. P0	4000130291	,	The second second
, (Document Nu	umber of Corporation (if know	vn)	
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation		orida Profit Co	orporation adopts the fo
A. If amending name, enter the new name	of the corporation:		
		ŧ	The ne
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "public Enternew principal office address, if as	he designation "Corp," "Inc, rofessional association," or	" or "Co". A	professional corporatio
(Principal office address <u>MUST BE A STRE</u>		,	
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OFF) D. If amending the registered agent and/o		ı Florida, enter	the name of the
new registered agent and/or the new re-		<u> </u>	
Name of New Registered Agent:	DOLI DAVY		
	3020 49TH STREET N	NORTH	
New Registered Office Address:	(Florida street a		•
,	SAINT PETERSBURG) }	Florida 33710
	(City)	, 	· · · · · · · · · · · · · · · · · · ·
New Registered Agent's Signature, if change I hereby accept the appointment as registered	ging Registered Agent: I agent. Cam femiliax with an agent. Signature of New Registered	u)	· · · · · · · · · · · · · · · · · · ·

Page 1 of 3

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>	Type of Action
<u>VP</u>	HERBERT D RUSSELL	6349 55TH AVE N. SAINT PETERSBURG. FL. 32043	.☑ Add □ Remove
· .			☐ Add ☐ Remove
·	· · · · · · · · · · · · · · · · · · ·		
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	ing or adding additional Articles, ent ditional sheets, if necessary). (Be spe	er change(s) here: ecific)	
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provisio	nendment provides for an exchange, ins for implementing the amendment of applicable, indicate N/A)	eclassification, or cancellation o if not contained in the amendme	of issued shares, ent itself:
	<u>-</u>		
	<u>,</u>		

	•	ч	

The date of each amendment(s)	adoption: $U - 15 V / O$
er v	(date of adoption is required)
Effective date if applicable:	no more than 90 days after amendment file date)
(7	to more than 90 days after amenament fite date)
•	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were aby the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statemen or each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	et for the amendment(s) was/were sufficient for approval
by	.,,,
	oting group)
action was not required. The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated 6	<u>-15-10</u>
Signature	
selegie	director, 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 ped fiduciary by that tiduciary)
•	DAVID LONGO
-	(Typed or printed name of person signing)
	, , , , , , , , , , , , , , , , , , , ,
	PRESIDENT
-	(Title of person signing)