## P04000139349

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300163716573

02/18/10--01011--014 \*\*35.00

Amend

TO FEB 18 AMIL: 41

10 FEB 18 AMIL: 41

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORE	ORATION:	RUIZZO FAMILY, INC	·
DOCUMENT NUMBER: P04000139349			
The enclosed Artic	cles of Amendment and fee ar	e submitted for filing.	
Please return all co	orrespondence concerning this	matter to the following:	
	J.	ANICE J RUIZZO	
	Na	me of Contact Person	
		Firm/ Company	
	200	MARYLAND AVE.	
		Address	
		CLOUD, FL 34769 ty/ State and Zip Code	
· .	JANICERUI	ZZO@GMAIL.COM  Tor future annual report notification)	
For further inform	ation concerning this matter, p	please call:	
JA	NICE J RUIZZO	at (407) 46	60-4335
Name	of Contact Person	Area Code & Daytime Tele	ephone Number
		ade payable to the Florida Depart	
<b> \$35</b> Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 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	e
		Tallahassee, FL 32301	

## **Articles of Amendment** to Articles of Incorporation of

FAMILY, INC.	who a
ntly filed with the Florida De	ept. of State) FILED
00139349	10 FEB 18 AMII: 4
per of Corporation (if known)	SECTION AMILY
Florida Statutes, this Florid	la Profit Corporation adopte the followin
the corporation:	
	The new
designation "Corp," "Inc," o essional association," or the	r "Co". A professional corporation
cable: CADDRESS)	
<u>E BOX</u> )	
gistered office address in Fl ered office address:	orida, enter the name of the
(Florida street addr	ess)
	, Florida
(City)	(Zip Code)
g Registered Agent: ent. I am familiar with and a	accept the obligations of the position.
	cable:  'ADDRESS')  gistered office address in Flered office address:  (Florida street address:  (Florida street address:

## 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>	Name	Address	Type of Action
DIR	STEVEN HOWES	1725 JAN LAN BLVD. ST. CLOUD. FL 34772	☑ Add ☐ Remove
			☐ Add ☐ Remove
			Add Remove
(attach addii	g or adding additional Articles, enter clional sheets, if necessary). (Be specific		
provisions (if not a	adment provides for an exchange, recla for implementing the amendment if no applicable, indicate N/A)	ssification, or cancellation of iss ot contained in the amendment i	ued shares, tself:
N/A			

The date of each amendmen	t(s) adoption: JANUARY 29, 2010
, <b>'</b>	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and 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	, <del>"</del>
	(voting group)
The amendment(s) was/wa action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_FEE	BRUARY 15, 2010
sel	y a director, president or other officer if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	JANICE J RUIZZO
	(Typed or printed name of person signing)
	VICE PRESIDENT
	(Title of person signing)