

PO4000155760

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

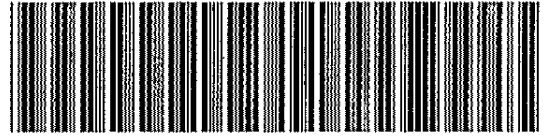
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: OLGA PALMER.COM, PA

DOCUMENT NUMBER: TAX ID # 20-1907192

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

Please return all correspondence concerning this matter to the following:

OLGA PALMER
(Name of Contact Person)

(Firm/ Company)

18305 BISCAYNE BLVD, SUITE 214
(Address)

AVENUE, FL 33160
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

OLGA PALMER at (305) 213-3331 CELL
(Name of Contact Person) (Area Code & Daytime Telephone Number)
(305) 466-1410 OFF

Enclosed is a check for the following amount:

\$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 Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

February 25, 2005

OLGA PALMER
18305 BISCAYNE BLVD STE 214
AVENTURA, FL 33160

SUBJECT: OLGA PALMER . COM P.A.
Ref. Number: P04000155760

We have received your document for OLGA PALMER . COM P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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) 245-6927.

Tracy Smith
Document Specialist

Letter Number: 405A00013471

3/7/05
I have completed the
information that was missing
Thank you
Olga B. Palmer
(305) 213-3331 cell

The date of each amendment(s) adoption: FEB 15th, 2005

Effective date if applicable: (SAME AS ABOVE)
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

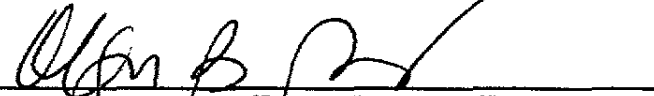
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"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.

Signed this 15th day of FEBRUARY, 2005.

Signature 

(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)

OLGA B. PALMER
(Typed or printed name of person signing)

PRESIDENT / OWNER
(Title of person signing)