# P04000157257

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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C.COULLIETTE MAY 0 4 2010

**EXAMINER** 

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

	ATION: Byan?		
DOCUMENT NUMBE	er: <u>P0400015</u>	7257	
The enclosed Articles of	f Amendment and fee are sub	omitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
	Ryan Dehni (Name of	Contact Person)	
P	hyan Dehnz,	Company)	
<i>ે</i> લેવા	O 12th Ave SE	Address)	
No	oples, F1. 341 (City/Sta	te and Zip Code)	
	E-mail address: (to be use	d for future annual report notific	eation)
For further information	concerning this matter, please	e call:	
Ryan Deha (Name of	Contact Person)		me Telephone Number)
		payable to the Florida Departmen	nt 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)
Amendn Division P.O. Bo:	Address nent Section of Corporations x 6327	Street Address Amendment Section Division of Corporati Clifton Building 2661 Executive Center	ons

Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 25, 2010

RYAN DEHNZ RYAN DEHNZ INC 2910 12TH AVE SE NAPLES, FL 34117

SUBJECT: RYAN DEHNZ INC Ref. Number: P04000157257

We have received your document for RYAN DEHNZ INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must have original signatures.

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

Please provide us with an email address for this business entity. The Division of Corporations sends important reminders and notices to those business entities that have provided our office with an email address. Make sure your entity receives these helpful communications by providing our office with an active email address.

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) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 410A00004669

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4/28/2010

AMENDMENT SECTION
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE, FL 32314

Re:

**RYAN DEHNZ INC** 

PER OUR CONVERSATION THIS MORNING, YOU DESCRIBED THAT OUR ORIGINAL AMENDMENT APPLICATION WAS REJECTED. WE HAVE INCLUDED ANOTHER APPLICATION WITH THE CORRECTIONS.

ALSO, YOU ADVISED THAT MY ORIGINAL CHECK FOR THE \$35.00 FEE IS CREDITED, THEREFORE, I HAVE NOT ATTACHED ANOTHER CHECK.

THANKING YOU IN ADVANCE,

RYAN DEHN

2010 HAY -3 AM 8: 00

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

### RYAN DEHNZ INC

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

P040	00157257		
(Document Numb	per of Corporation (if k	nown)	
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this	Florida Profit Corporation	adopts the follow
A. If amending name, enter the new name of t	the corporation:		
			The new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the contain the word "chartered," "professions"	designation "Corp," "	Inc," or "Co". A profession	rated" or the nal corporation
B. Enter new principal office address, if appli (Principal office address MUST BE A STREET			10 t
	<del></del> -		NOIS
			<u></u>
C. Enter new mailing address, if applicable:			VISION OF CORMORA
(Mailing address <u>MAY BE A POST OFFIC</u>	<u>E BOX</u> )		
D. If amending the registered agent and/or re	gistered office addres	s in Florida, enter the name	of the
new registered agent and/or the new regist			
Name of New Registered Agent:			
-			
New Registered Office Address:	(Florida stre	et address)	
-	(City)	, Florida (Zip Code)	
	, ,,	(2.7 33.0)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag	<mark>g Registered Agent:</mark> gent.     I am familiar wit	th and accept the obligations o	of the position.
——————————————————————————————————————	mature of New Registe	ered 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)

<u>Title</u>	Name	Address	Type of Action
SEC	LORI A DEHNZ	2910 12TH AVE SE NAPLES, FL 34117	□ Add □ ☑ Remove
(anden da	lditional sheets, if necessary). (Be sp	ectric)	
	·		
provisio	nendment provides for an exchange, ons for implementing the amendment of applicable, indicate N/A)		
- <del></del>			

The date of each amendn	nent(s) adoption: <u>2/1/2010</u>
Effective date <u>if applicab</u>	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment	(s) ( <u>CHECK ONE</u> )
The amendment(s) was by the shareholders wa	/were adopted by the shareholders. The number of votes cast for the amendment(s) s/were sufficient for approval.
	/were approved by the shareholders through voting groups. The following statement vided for each voting group entitled to vote separately on the amendment(s):
"The number of vo	otes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required	/were adopted by the incorporators without shareholder action and shareholder
Dated_2	2/5/2010
	(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)
	RYAN DEHNZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)