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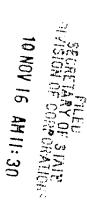
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G.COULLIETTE

NOV 17 2010

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF CORI	AME OF CORPORATION: Teddi A. Segal, PA			
DOCUMENT NU	NT NUMBER: P04000157626			
The enclosed Artic	eles of Amendment and fee a	are submitted for filing.		
Please return all co	orrespondence concerning th	is matter to the following:		
		Teddi A. Segal		
	7	Name of Contact Person		
	Т	eddi A. Segal, PA		
		Firm/ Company		
	1235	Euclid Ave #10		
		Address		
		armi Beach FL 33139 City/ State and Zip Code		
		i424@aol.com		
	E-mail address: (to be use	ed for future annual report notification)		
For further informa	ation concerning this matter,	please call:		
	Alan Segal	at (215)2(08-7314	
	of Contact Person	Area Code & Daytime Tel		
Enclosed is a check	for the following amount n	nade payable to the Florida Depart	ment of State:	
以\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section		Street Address Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Teddi	A. Segal, P.	Α		
(Name of Corporation as curre	ntly filed with t	he Florida Dept. o	of State)	
P04	000157626			10 NOV
(Document Num	ber of Corporati	on (if known)	· · · · · · · · · · · · · · · · · · ·	10 NOV
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	5, Florida Statut	es, this <i>Florida Pr</i>	ofit Corporation add	opts the follo
A. If amending name, enter the new name of	the corporation	<u>n:</u>		AH :: 3 The Thew
name must be distinguishable and contain tabbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "project. B. Enter new principal office address, if application of the principal office address.	designation "Co fessional associa licable:	orp ," "Inc," or \red "C	o". A professional oviation "P.A." re #10	ed" or the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		1235 SE Euclid Ave	e #10	
D. If amending the registered agent and/or r	egistered office			 _ t <u>he</u>
new registered agent and/or the new regis	tered office add	<u>lress:</u>		
Name of New Registered Agent:			,	
New Registered Office Address:	(Florid	da street address)		
-	(Cin)		Florida	
New Registered Agent's Signature, if changin I hereby accept the appointment as registered at			(Zip Code) t the obligations of th	e position.
Si	gnature of New	Registered Agent, i	f 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>	<u>Name</u>	Address	Type of Action
-			
E. If amen	nding or adding additional Artic additional sheets, if necessary).	les, enter change(s) here: (Be specific)	
provisi	mendment provides for an exchaions for implementing the amendate not applicable, indicate N/A)		
			

The date of each amendmen	t(s) adoption: 9/15/2010		
Street W. Barrier Bright	(date of adoption is required)		
Eff. ive date <u>if applicable:</u>	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.		
	re approved by the shareholders through voting groups. The following statement of 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)		
	(voting group)		
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder		
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder		
Dated	11/7/2010		
Signature	COLPE		
(By	a director, president or other officer - if directors or officers have not been		
sele	cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)		
арр	omed haddlary by that haddlary)		
	Teddi A. Segal		
	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		
	() L		