P04000159/03

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(City/State/Zip/Phone #)				
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JUN 20 2012 T. ROBERTS

COVER LETTER

TO: Amendment Section Division of Corporations

FORMUL	AE, INC	
ce concerning this matte	er to the following:	
AESE		
	(Name of Contact Person)
INC		
	(Firm/ Company)	
UNRISE B	LVD, STE 1	4G
	(Address)	
OALE, FL 3	3304	
	(City/ State and Zip Code	e)
nail address: (to be used	for future annual report	notification)
ming this matter, please	call:	
IAESE	_{at} 954	336-3772 ode & Daytime Telephone Number)
act Person)	(Area Co	ode & Daytime Telephone Number)
lowing amount made pa	ayable to the Florida Depa	urtment of State:
□\$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)
		Address ment Section
	PO4000159 Indiment and fee are subsection to be used and the section of the sect	(Name of Contact Person INC (Firm/ Company) SUNRISE BLVD, STE 1 (Address) OALE, FL 33304 (City/ State and Zip Code Rese@gmail.com mail address: (to be used for future annual report of the state of State

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of



(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: "incorporated" or the abbreviation name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{y}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change Add Remove	VP,T	BARBARA POPE	. 3000 E SUNRISE BLVD, STE 14G FT LAUDERDALE, FL 33304
2) Change X Add Remove	P,D	DONALD A HAESE	3000 E SUNRISE BLVD, STE 14G FT LAUDERDALE, FL 33304
3) Change Add Remove	VP, D	RALPH CLEMENTS	21540 PROVINCIAL BLVD, # 2913 KATY, TX 77450
4) Change	VP	CHARLES NORCROSS	7758 SPRING CREEK DR WEST PALM BEACH, FL 33411
5) Change Add Remove	VP	DIANA CLEMENTS	21540 PROVINCIAL BLVD, # 2913 KATY, TX 77450
6) Change Add Remove	\$	SANDRA SLEMP	4923 SW 32 WAY FT LAUDERDALE, FL 33312

(attach additional sheets, if necessary). (Be specific)
1. NAME OF CORPORTATION CHANGED TO
COUPON PROFIT SYSTEMS, INC.
2. ADDITIONAL OFFICERS ADDED PER LIST
3. TOTAL STOCK CHANGED FROM 100 SHARES TO 1000 SHARES
THE ABOVE CHANGES WERE APPROVED PER BOARD OF DIRECTORS MEETING ON 06/14/2012
·

E. If amending or adding additional Articles, enter change(s) here:

The date of each amendment(s) adoption:	6/14/2012
Effective date <u>if applicable</u> :	6/14/2012
<u></u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CH	ECK ONE)
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The number of votes cast for the amendment(s) approval.
	e shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
	ndment(s) was/were sufficient for approval
by(vol	ing group)
action was not required.	board of directors without shareholder action and shareholder
action was not required	incorporators without shareholder action and shareholder
Dated Signature Sound	CH arse
(By a director, pres	ident or other officer – if directors or officers have not been or
	ONALD A HOESE (Typed or printed name of person signing)
	PRESIDENT
	(Title of nercon cigning)