P05000000359

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800173375798

04/06/10--01019--004 **35.00

Amend + M/C

APR 2 0 2010

TO:	Amendment Section
	Division of Corporations

DOCUMENT NUMBER:

NAME OF CORPORATION:	U. Sellars	Enterprises, Inc.

P05000000359

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

Please return all correspondence concerning this matter to the following:

Jennifer Harrell

Name of Contact Person

Creative Consults, Inc.

Firm/ Company

271 East River Road

Address

East Palatka, FL 32131

City/ State and Zip Code

ien D creative consults inc. com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

at (904) 392-9430 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee ■\$43.75 Filing Fee & ☐ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status already on file (Additional copy is enclosed) 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 Tallahassee, FL 32301



April 9, 2010

JENNIFER HARRELL J.HARRELL ENTERPRISES, INC. 271 E RIVER RD E PALATKA, FL 32131

SUBJECT: J. SELLARS ENTERPRISES, INC.

Ref. Number: P05000000359

We have received your document for J. SELLARS ENTERPRISES, INC. 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L07000075302 - J HARRELL ENTERPRISES LLC.

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) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 310A00008761

Articles of Amendment

tΛ

Articles of Incorporation

J. Sellars Enterprises, Inc.

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

(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:

4 .	If amending n	ame,	enter	the new	name	of	the	cor	por	atior	n:

Creative Consults, Inc.

TOMAPRIS AND L

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "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)

Same address

C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)

Same address

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:

Jennifer Harrell

New Registered Office Address:

ed Office Address: (Florida street address) (Same address)

271 East River Road,
Florida,
(City) FL (Zip Code) 32131

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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
P	Jonnifer L. Sellars	same	Add Remove
P	Jernifer L. Harrell	same	Add Remove
			☐ Add ☐ Remove

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

N/A

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

N/A

The date of each amendment(s) adoption: $4/16/2010$
The date of each amendment(s) adoption: 4/16/2010 Effective date if applicable: 4/16/2010 (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted 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.
Dated_ 4/16/2010
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)
(Typed or printed name of person signing)
President (Title of person signing)