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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TALLAHASSEE. FLORIDA

APPROYEL

May 109

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION:	Central Florid	a Rentals 8	& Manag	gement Inc
DOCUMENT NUMBER:			P050000	16475	
The enclosed Artic	les of Amendment a	nd fee are submitt	ed for filing.		
Please return all con	rrespondence concer	ming this matter to	o the following	g:	
_		Bernard			
		Name of Con	tact Person		
_	Centra	al Florida Rentals	s & Managen	nent Inc	<u> </u>
		Firm/ Co	mpany		
_		203 Spanish	Moss Road		
		Addr	ess		
_		Davenport	FL 33837		· .
		City/ State an	d Zip Code		
	E-mail address: (cfrm@spryne to be used for future	t.com annual report not	tification)	
For further informa	tion concerning this	matter, please cal	.l;		
E	Bernard Byrne	at (863)	42	21-0905
Name	of Contact Person		Area Code & I	Daytime Tele	ephone Number
Enclosed is a check	for the following ar	mount made payal	ole to the Flori	ida Depart	ment of State:
□ \$35 Filing Fee	✓ \$43.75 Filing Fee Certificate of Sta	tus Ce	3.75 Filing Fee & entified Copy dditional copy is		S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ad Amendmen Division of P.O. Box 63	t Section Corporations	Ame Divis Clift	et Address endment Section sion of Corpor on Building	rations	
Tallahassee, FL 32314		2661	2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

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tly filed with the Floric	la Dept. of State)	Αφγ Sex 00
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Florida Statutes, this F		
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(Florida street	address)	
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. (C:4)	, Florida	
(City)	(Zip Coae)	
Registered Agent:		
	and accept the obligations of the	e positio
mutuma of N D i-t	ad Against if about its	
	tly filed with the Florice 00016475 er of Corporation (if known of Corporation) Florida Statutes, this File the corporation: e word "corporation," Institution (Corp.," "Institution association," or cable: ADDRESS) EBOX Gistered office address: (Florida street of City) Registered Agent: ent. I am familiar with the	Florida Statutes, this Florida Profit Corporation adopted the corporation: Word "corporation," "company," or "incorporated lesignation "Corp," "Inc," or "Co". A professional conscious association," or the abbreviation "P.A." Cable: ADDRESS

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VP</u>	Adel Zamali	711 E. Main Street Suite 4 Haines City, FL 33844	☑ Add ☐ Remove
			☐ Add☐ Remove
	-		□ n
(attach a	dditional sheets, if necessary).	(Be specific)	
<u>provisi</u>	mendment provides for an exchons for implementing the amenotor applicable, indicate N/A)	ange, reclassification, or cancellation dement if not contained in the amendm	of issued shares, ent itself:

··· • The date of each amendmen	t(s) adoption: 12/01/2009
Effective date <u>if applicable</u> :	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) tere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statemented 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	."
<u> </u>	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
action was not required.	Te adopted by the meorporators without shareholder detton and shareholder
Dated_12/*	5/2009
Signature _	Heund Opec
sel	y a director, president or other officer—if directors or officers have not been ected, by an incorporator—if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Bernard Byrne
	(Typed or printed name of person signing)
	President
	(Title of person signing)