P05000046490

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SECRETARY OF STATE
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COVER LETTER

Amendment Section

TO:

Division of Corporations
SUBJECT: CULLEN TRAVERSO INC. (Name of corporation)
DOCUMENT NUMBER: P05000046490
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
CULLEN TRAVERSO (Name of contact person)
CULLEN TRAVERSO, INC.
6718 GRIFFIN BLVD.
FORT MYERS, FL 33908 (Oity/state and zip code)
For further information concerning this matter, please call:
(Name of contact person) at (235) 4/89-320 (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Articles of Amendment to Articles of Incorporation of

	PO 50000 46490 \$2 8
	(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:
Ţ	NEW CORPORATE NAME (if changing):
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
	AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
4	ARTICLE IV: THE NAME OF THE
-	REGISTERED AGENT 15 TO BE CULLEN
-	TRAVERSO AS CASHEL TRAVERSO
	HAS RESIGNED. ADDRESS REMANS SAM
	ARTICLE VI: THE NAME OF THE
	OFFICER DIRECTOR OF THE CORPORATIO
	15 CULLEN TRAVERSO, NOT CASHEL
	TRAVERSO APPRESS REMAINS SAME
•	(Attach additional pages if necessary)
	If an amendment provides for exchange, reclassification, or cancellation of issued shares, provision for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N
	NA

(haustinual)

The date of each amendment(s) adoption: August 15, 2005			
Effective date if applicable: (no more than 90 days after amendment file date)			
Adoption of Amendment(s) (CHECK ONE)			
☐ The amendment(s) was/were approved 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.			
Signed this 15 tH day of August, 2005.			
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)			
CASHS L TRAVERSO (Typed or printed name of person signing)			
OFFICER/DIRECTOR (Title of person signing)			
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.			
Cullen B Franciso 8-16-05 (Signature of Registered Agent) (Date)			