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COVER LETTÉR

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Barton & Ro	se, Inc.	
DOCUMENT NUMBER: P05000046583	a market of the second of the	e a <u>e</u>
The enclosed Articles of Amendment and fee as	re submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
Giovanni Cassio	·	٠
(Name o	of Contact Person)	· · · · · · · · · · · · · · · · · · ·
Barton & Rose, Inc.		ş.u.
(Fir	m/Company)	· · · · · · · · · · · · · · · · · · ·
351 S. Cypress Rd. #305	* *	<u> •</u>
	(Address)	
Pompano Beach, FL 33060		<u> </u>
(City/ St	tate and Zip Code)	
For further information concerning this matter,	please call:	
Giovanni Cassio	at (954) 545-4250	
(Name of Contact Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for the following amount:		
☑ \$35 Filing Fee	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status 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 Circ	le

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

Revised

April 11, 2006

GIOVANNI CASSIO 351 S. CYPRESS RD., #305 PAMPANO BEACH, FL 33060

SUBJECT: BARTON AND ROSE, INC.

Ref. Number: P05000046583

We have received your document for BARTON AND ROSE, 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 current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6916.

Carol Mustain Document Specialist

Letter Number: 006A00024489

SHOTTARDS SERVICES

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RECEIVE ...

Francisco Company

Articles of Amendment to Articles of Incorporation of

Barton and Rose, Inc.	
(Name of corporation as cu	urrently filed with the Florida Dept. of State)
P05000046583	
(Document nu	umber of corporation (if known)
Pursuant to the provisions of section 607.100 adopts the following amendment(s) to its Ar	06, Florida Statutes, this <i>Florida Profit Corporation</i> ticles of Incorporation:
NEW CORPORATE NAME (if changing	<u>):</u>
A professional corporation must contain the word "c	r "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") chartered", "professional association," or the abbreviation "P.A.")
and/or Article Title(s) being amended, added	THAN NAME CHANGE) Indicate Article Number(s) d or deleted: (BE SPECIFIC)
Mitchell Landberg S	Please Delete
	SECRETAR OF STATE
(Attach ad	lditional pages if necessary)
	lassification, or cancellation of issued shares, provisions ained in the amendment itself: (if not applicable, indicate N/A

(continued)

The date of each amendment(s) adoption: February 28th, 2006
Effective date if applicable: February 28th, 2006
(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.
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)
Giovanni Cassio (Typed or printed name of person signing)
Director
(Title of person signing)

FILING FEE: \$35