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(Re	questor's Name)	
(Ad	dress)	
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(Cít	y/State/Zip/Phone #	<i>f</i>)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	

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DIVISION OF CHECKATIONS

OF MAY 11 PM 15. 16

B. McKnight MAY 1 9 2005

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: Annal A	rathony Shelton Fine	nciel, Inc.
DOCUMENT NO	JMBER:		
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	s matter to the following:	
	Name of	She I Fou of Contact Person)	
	Jonald Anthony	Shellon Financia m/Company)	1 Inc
	9042 Sw 14	2 Ave # 218 (Address)	
	Miemi Fl (City/St	ate/ and Zip Code)	
For further inform	ation concerning this matter,	please call:	
	A. She Hon ne of Contact Person)	at (305) \	- ZO 13 e Telephone Number)
Enclosed is a chec	ck for the following amount:		
\$35 Filing Fee	☐ \$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)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399		prations reet	

Articles of Amendment to Articles of Incorporation

Janald		
	L Anthony Shelfon tinencial Inc	55
(Name o	of corporation as durrently filed with the Florida Dept. of State)	OS MAY
	· · · · · · · · · · · · · · · · · · ·	
	(Document number of corporation (if known)	PH 12:
	Constitution (AT 1000 Till 13 Contract of the File III The Co. Communication	<u>برا</u>
	f section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> ment(s) to its Articles of Incorporation:	ිත
dopts the following amendi.	ment(s) to its futures of meorporation.	
IEW CORPORATE NAM	IE (if changing):	
0		
	ion," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")	= =
	contain the word "chartered", "professional association," or the abbreviation "P.A."	')
•	•	
	ED- (OTHER THAN NAME CHANGE) Indicate Article Number(s	i)
nd/or Article Title(s) being	amended, added or deleted: (BE SPECIFIC)	
	the state of the s	
	the state of the s	
	and the control of th	
		- •
		- •
		- •

(continued)

The date of each amendment(s) adoption:	
Effective date if applicable:	
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.	n
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	d
Signed this 9th day of May , zoos	
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)	
(Title of person signing)	

FILING FEE: \$35