Division of Corporations Public Access System

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(((H07000241561 3)))



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To:

Division of Corporations

Fax Number

: (850)205-0380

From:

: FLORIDA TRUST INSURANCE INC. Account Name

Account Number : I20070000133 Phone : (305)883-8488

: (305)883-8693 Fax Number

COR AMND/RESTATE/CORRECT OR O/D RESIGN

LITTLE ARTHUR CORP

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Corporate Filing Menu

EP-	27-2007(THU) 16:20 FLORDA TRUST INSURANCE (FAX)3058838693 P. 002/004 $+++++++++++++++++++++++++++++++++++$
	COVER LETTER DA7
	TO: Amendment Section Division of Corporations
	NAME OF CORPORATION: CHHE Arthur Corp.
	DOCUMENT NUMBER: P05000085165
	The enclosed Articles of Amendment and fcc are submitted for filing.
	Please return all correspondence concerning this matter to the following:
	Judy Or Diumori (Name of Contact Person)
	Flunch Trust Nourance (Firm Company)
	GOGO NW S. RIVOY Dr. #4
	(City/ State and Zip Code)
	For further information concerning this matter, please call:
	(Name of Contact Person) at (205) 883-8488 (Area Code & Daytime Telephone Number)
	Enclosed is a check for the following amount:
٠	\$35 Filing Fee \$\begin{array}{c} \$43.75 Filing Fee & \$\begin{array}{c} \$43.75 Filing Fee & \$\begin{array}{c} \$52.50 Filing Fee & \$\begin{array}{c} \$52.50 Filing Fee & \$\begin{array}{c} \$52.50 Filing Fee & \$\begin{array}{c} \$Certificate of Status & \$\begin{array}{c} \$Additional copy is & \$\begin{array}{c} \$Certified Copy & \$\begin{array}{c} \$Certified Copy & \$\begin{array}{c} \$Additional Copy & \$\begin{array}{c} \$Certified
	Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle
	Tallahassee, FL 52514 Zoo1 Excedive Center Circle

HO70002415613

05:31 (UHJ)70Q5-7:	FLORDA TRUST INSURANCE	(FAX)3058838693
	17000	ment SOJULISO TALECARIA
	Articles of Amenda to	ment (A)
	Articles of Incorpor of	ration
61+1	e Arthur Corp	
	(Name of corporation as currently filed with	the Florida Dept. of State)
	P05000075	165
	(Document number of corporation	on (if known)
	ions of section 607.1006, Florida Stat mendment(s) to its Articles of Incorp	utes, this Florida Profit Corporation oration:
NEW CORPORATE	NAME (if changing):	
- N	17	
(Must contain the word "co (A professional corporation	orporation," "company," or "incorporated" or n must contain the word "chartered", "profess	the abbreviation "Corp.," "Inc.," or "Co.") the abbreviation "P.A."
AMENDMENTS AD and/or Article Title(s)	OPTED- (OTHER THAN NAME (being amended, added or deleted: (B	CHANGE) Indicate Article Number(s) E SPECIFIC)
	VOLORIA DI MANTE	in (12 con internal)
add: u	RIGOLD F LAUNT)/ (Presicient)
add: u	700 NM 10 2+ 4	1)/ (Presidien+)
add: u	100 NW 19 3+ +	5 (Presicient)
add: u	10 NW 19 st #	1)2 (Presicient) 5
add: u	10 NW 19 5+ + 10 NW 19 5+ + 10 NW 19 3312	5 (Secretary
add: u	Raul moro	1) (Secretary #1)
add: u	Rowl MUTO 1305 W 46st	2 (Secretary #100
add: u	Raul moro	FRESICIENT) F 7701 S Secretary HIVE
add: u	Rowl MUTO 1305 W 46st	12 (Secretary #1000

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HU70000415613 pgc
The date of each amendment(s) adoption: Classification: (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 of 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)
Secretary

FILING FEE: \$35

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