P05000090522

(Re	questor's Name)	
(Ad	dress)	
(Address)		
(Cit	y/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
		}
		į. Į



500057302265

07/25/05--01050--019 **35.00





FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 26, 2005

C

MICHAEL D. UMILE ABSOLUTE RESIDENTIAL MARKERING INC 210 OREGON LANE BOCA RATON, FL 33487

SUBJECT: ABSOLUTE RESIDENTAIL MARKETING INC.

Ref. Number: P05000090522

We have received your document for ABSOLUTE RESIDENTAIL MARKETING 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):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6964.

Irene Albritton Document Specialist

Letter Number: 905A00048630

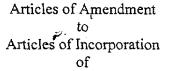
05 AUG -8 AM 8: 00

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>ABSOLU</u>	TE RESIDENTIAL	MAREAUL, INC.
DOCUMENT NUMBER: POS DOWS	90522	
The enclosed Articles of Amendment and fee an	re submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
MICHAEL T (Name of	·	
210 ORE60W LA		
BOCA RATON, R. (City/St.	33417	
For further information concerning this matter,		
MICHAEL D. UMILE (Name of Contact Person)	at (561) 7/5- (Area Code & Daytime	9/4) Telephone Number)
Enclosed is a check for the following amount:		
□ \$35 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 Address Amendment Section	Street Address Amendment Section	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399





(Name of corporation as currently filed with the Florida Dept. of State)

Pos 000 0905 72
(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:

or the abbreviation "Corp.," "Inc.," or "Co.") essional association," or the abbreviation "P.A.") CCHANGE) Indicate Article Number(s) BE SPECIFIC) HOM:
-
FROM:
MICHMEL D. UMILE
ILLIAM BOTELHO
•
ICHAEL D. UMILE
MURL TATUM
necessary)
or cancellation of issued shares, provision mendment itself: (if not applicable, indicate h
f

(continued)

The date of each amendment(s) adoption: 6/24/05
(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 4th day of Avbrit, 2005. Signature Mull (M)
(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)
MICHAEL D. UMILE
(Typed or printed name of person signing)
PRESIDENT (Title of person signing)
(Title of person signing)