# 5000119363

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
· <b>·</b>				

Office Use Only



900174115069

04/05/10--01040--018 \*\*43.75



OCT - 5 2010

### **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPO	DRATION: Ad	dison Fotographic Servi	ces, Inc.		
DOCUMENT NUMBER: P05000119363					
The enclosed Article	es of Amendment and fee are	e submitted for filing.			
Please return all corn	respondence concerning this	matter to the following:			
Sharon R. Moon					
	Na	me of Contact Person			
Sharon R. Moon, EA					
		Firm/ Company			
<u></u>	21 Doi	ndanville Rd, Unit 22			
		Address			
_		ugustine, FL 32080			
	Cit	y/ State and Zip Code			
	E-mail address: (to be used	addfitz.com for future annual report notification)			
For further informat	ion concerning this matter, p	please call:			
Shar	on R. Moon, EA	at (904)	501-8484		
Name o	f Contact Person	Area Code & Daytime T	elephone Number		
Enclosed is a check	for the following amount ma	ade payable to the Florida Depa	artment of State:		
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status		\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Add Amendment Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Cir	cle		

Tallahassee, FL 32301



April 7, 2010

SHARON R MOON, EA 21 DONDANVILLE RD UNIT 22 ST AUGUSTINE, FL 32080

SUBJECT: ADDISON FOTOGRAPHIC SERVICES, INC.

Ref. Number: P05000119363

We have received your document for ADDISON FOTOGRAPHIC SERVICES, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

#### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P05000119363 PHOTOGRAPHIC ARTS, LLC.

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) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 910A00008537

#### Articles of Amendment to Articles of Incorporation of

•	. Articles of Incorporation of	2010 OCT ED
	Addison Fotographic Services, Inc.	TATE ONE TO AM OF
	(Name of Corporation as currently filed with the Florida Dept. of State)	- `* 4/4/SSR-OF 0. 40
٠.	P05000119363	
	(Document Number of Corporation (if known)	$\overline{}$

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

Photographic Arts, Inc.		
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	e designation "C	poration," "company," or "incorporated" or Corp," "Inc," or "Co". A professional corpora iation," or the abbreviation "P.A."
B. Enter new principal office address, if applie		600 Anastasia Blvd
(Principal office address <u>MUST BE A STREE</u>	AT ADDRESS )	St. Augustine, FL 32080
	•	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI		600 Anastasia Blvd
(muning dadress MAT BE AT OST OFFI	CE BUX)	000 Aliastasia bivo
(Muning undress MAT BE ATOST OFFI	<u>CE BUX</u> )	St. Augustine, FL 32080
	registered office	St. Augustine, FL 32080 e address in Florida, enter the name of the
D. If amending the registered agent and/or	registered office	St. Augustine, FL 32080 e address in Florida, enter the name of the
D. If amending the registered agent and/or new registered agent and/or the new regi	registered office stered office ad	St. Augustine, FL 32080 e address in Florida, enter the name of the
D. If amending the registered agent and/or new registered agent and/or the new registered Agent:	registered office stered office ad	St. Augustine, FL 32080  e address in Florida, enter the name of the ldress:  cida street address)  , Florida
D. If amending the registered agent and/or new registered agent and/or the new registered Agent:	registered office stered office ad (Flor	St. Augustine, FL 32080  e address in Florida, enter the name of the ldress:  cida street address)  , Florida (Zip Code)

## If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary) Address **Type of Action** Title Title Name ☐ Add \_\_\_ Remove \_\_\_\_\_ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

$\langle J_{-4}, -F_{-4}, J_{-4}, J_{-4}, J_{-4}, J_{-4}, J_{-4} \rangle$	
Effective date <u>if applicable</u> : April 1, 2010 (date of adoption is required)	
(no more than 90 days after amendment file date)	· ·
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.	r the amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the am	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
<ul> <li>The amendment(s) was/were adopted by the board of directors without shareholder actin action was not required.</li> <li>The amendment(s) was/were adopted by the incorporators without shareholder action as action was not required.</li> </ul>	
Signature  (By a director, president or other officer – if directors or officers selected, by an incorporator – if in the hands of a receiver, truste appointed fiduciary by that fiduciary)	
Thomas F. Addison (Typed or printed name of person signing)	<del></del> .
President (Title of person signing)	