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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SETH LEE	CORP.			
DOCUMENT NUMBER: P05000119894				
The enclosed Articles of Amendment and fee a	re submitted for filing.			
Please return all correspondence concerning this	s matter to the following:			
DAVID S. LEE				
Name (of Contact Person			
SETH LEE CORP.				
Fi	m/ Company			
11102 LANE PARK ROA	AD .			
Address				
TAVARES, FL 32778				
	tate and Zip Code			
rebeccadlland@earthlin	nk.net d for future annual report notification)			
For further information concerning this matter,	please call:			
David S. Lee	at (352) 253-0872			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount m	ade payable to the Florida Department of State:			
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & S52.50 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 Circle Tallahassee, FL 32301			

Articles of Amendment to Articles of Incorporation of

SETH LEE CORP			
(Name of Corporation as cur	rently filed with th	ne Florida Dept. of Stat	<u>e</u>)
P05000119894			
(Document Nu	umber of Corporation	on (if known)	
Pursuant to the provisions of section 607.10 following amendment(s) to its Articles of Income.		es, this <i>Florida Profit C</i>	Corporation adopts the
A. <u>If amending name, enter the new name</u>	of the corporation	<u>:</u>	
The new name must be distinguishable "incorporated" or the abbreviation "Corp., "Co". A professional corporation natassociation," or the abbreviation "P.A."	" "Inc.," or Co.,	" or the designation "C	orp, " "Inc," or
B. Enter new principal office address, if ap	onlicable:		
(Principal office address <u>MUST BE A STRE</u>			700 1
			N N N N N N N N N N N N N N N N N N N
C. Enter new mailing address, if applicable	le:		SEE, FE
(Mailing address MAY BE A POST OFF			77 7 77 77
			27 % T
	-		3 7 9
		<u></u>	<u> </u>
D. If amending the registered agent and/or			r the name of the
new registered agent and/or the new reg	<u>gistered office addı</u>	ress:	
Name of New Registered Agent:			
New Registered Office Address:	(Florid	a street address)	
			, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if chang	ving Registered Ag	ent:	
hereby accept the appointment as registere position.			the obligations of the
<u>-</u> -			
	Signature of New F	Registered Agent, if chan	ging

- If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director. (Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.) Title(s) Name Address DAVID S. LEE 1)P 11102 LANE PARK ROAD TAVARES, FL 32778 2) VP 11102 LANE PARK ROAD JASON M. LEE TAVARES, FL 32778 3)____ 5)____ If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed: Title(s) <u>Name</u> Title(s) <u>Name</u> 1)____ 4)____

6)____

3)____

(att	ach additional sheets, if neces	ssary).	(Be specific)	•	
					
			·····	·	
If	an amandment provides for	on evch	ange reclassifies	tion or cancall	atian of issued shar
If pi	an amendment provides for covisions for implementing to (if not applicable, indicate l	<u>he amen</u>	ange, reclassifica dment if not con	tion, or cancell	ation of issued shar nendment itself:
If po	<u>rovisions for implementing t</u>	<u>he amen</u>	ange, reclassifica	tion, or cancell	ation of issued shar endment itself:
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If pu	<u>rovisions for implementing t</u>	<u>he amen</u>	ange, reclassifica dment if not con	tion, or cancellation the am	ation of issued shar lendment itself:
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If p)	<u>rovisions for implementing t</u>	<u>he amen</u>	ange, reclassifica	ation, or cancell	ation of issued shar tendment itself:

The date of each amendment	(s) adoption: NOVEMBER 1, 2011
	(date of adoption - required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
'Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement l for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	east for the amendment(s) was/were sufficient for approval
by	22
	(voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder
<i>,</i>	/EMBER 1, 2011
selec	a director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)
	DAVID S. LEE (Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)