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Division of Corporations

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SAFE HANDS, INC.

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	COVER LET	TER
TO: Amendment Section Division of Corporations		
NAME OF CORPORATION, SAFE	HANDS, INC	
DOCUMENT NUMBER: P050001	21953	`
The enclosed Articles of Amendment and fa		
Ploase return all correspondence concerning	-,	
Jay E. Reub	pns	
Vay El 1000	Name of Contact	Person
·—————————————————————————————————————	· .	
5317 RUCK	Firm/ Comp HEAD CIRCLE	any
, JOHN 1	Address	
BOCA RATO	ON FL 33486	
	City/ State and Z	ip Code
jayreubens@ao	ol.com	
	(to be used for future annua	report natification)
For further information concerning this mat	itor, please call:	
Jay E. Reubens	_{at} (56	1 ,504-3440
Name of Contact Person		irea Code & Daytime Telephone Number
Enclosed is a check for the following around	mt made payable to the Flori	in Department of State;
S35 Filing Fee S43.75 Filing Certificate of		Certificate of Status
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallabassee, FL 32314	·	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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<u>್</u> ಕ	Articles of Amendment		<u>.</u>
	Articles of Incorporation of		່ງ ' ເວ
SAFE HANDS, INC.	u 2	55	
(Name of Corporation as	currently filed with the Florida Dept.	(State)	3
P05000121953	·		وي ا
(Document	t Number of Corporation (if known)		, %
ursuant to the provisions of section 607.1 a Articles of Incorporation:	1006, Florida Statutes, this Florida Profi	Corporation adopts the following affice	dment(s
. If amonding name, enter the new na	me of the corneration:	•	
SH Distribution Inc.		The	10 <i>8</i> (4)
word "chartered," "professional associates, Enter new principal office address (Principal office address MUST BE A STATE OF THE ASSOCIATE OF T	if applicable; iREET ADDRESS) Cable: OFFICE BOX	la, enter the name of the	
new registered agent and/or the new		an entre and plants of any	
Name of New Registered Agent	NRAI Services, Inc.		•
·	515 E. Park Ave.		
	(Florida street address)		
New Registered Office Address:	Tallahassee	, Plorida 32301	
	(City)	(Zip Cade)	
New Registered Agent's Signature, He I hereby accept the appointment as regist AGE Signature, He	hanging Revisioned Avent: ored agent, I am faibiliar with and acces in Wonstell gnature of North Registered Agent, if char		

Page 1 of 4

	adding additional Articles, enter change(s) here: al sheets, if necessary). (Bu specific)
	<u> </u>
	<u></u>
	·
	
<u>rovisions fe</u>	wnt provides for an exchange, reclassification, or cancellation of issued shares, or implementing the amendment if not contained in the amendment itself; oplicable, indicate N/A)
	·

The date of each amendment(s) as	September 15, 2011
Effective date if annicable:	·
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the abareholders was/were at	apted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.
The amendment(s) was/were approval be separately provided for	proved by the shareholders through voting groups. The following statement 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 add action was not required.	opted by the board of directors without shareholder action and shareholder
The emendment(s) was/were ad- action was not required.	opted by the incorporators without shareholder action and shareholder
_{Deted} March	20, 2012
Signature	161)
(Byla c	irector, president or other officer – if directors or officers have not been of, by an incorporator – if in the hands of a receiver, trustee, or other court tool fiduciary by that fiduciary)
	Jay E. Reubens
	(Typed or printed name of person signing)
•	President
,	(Title of a second classes)

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