P05000137074

(Re	equestor's Name)	.
(Ac	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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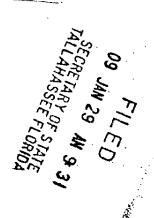




900140075549

01/09/09--01010--003 **35.00

Effective Date 2/1/09





COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	CHARLENE	RENDE IN C.	
DOCUMENT NUMBER:	0500013707	<u> </u>	
The enclosed Articles of Amendme	ent and fee are submi	tted for filing.	
Please return all correspondence co	ncerning this matter	to the following:	
	CHARLENE		
	(Name of Contact	Person)	
C	HARLENE REN		
	(Firm/ Compa	any)	
13	Address)	h terpace	
	MAMI, FL 3		
	(City/ State and Zi	ip Code)	
For further information concerning	this matter, please ca	all:	
CHARLENE REY		(305) 244-	
(Name of Contact Person)		(Area Code & Daytime To	elephone Number)
Enclosed is a check for the following	ng amount made paya	able to the Florida Depar	tment of State:
\$35 Filing Fee \$43.75 Filing Certificate o	f 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Am Div Clit 266	eet Address lendment Section rision of Corporations fron Building 11 Executive Center Circ lahassee, FL 32301	le



January 16, 2009

CHARLENE REY 13151 NW 11 TERR MIAMI, FL 33182

SUBJECT: CHARLENE RENEE INC

Ref. Number: P05000137074

We have received your document for CHARLENE RENEE 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):

The date of adoption of each amendment must be included in the document.

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) 245-6927.

Tracy Smith Document Specialist

Letter Number: 409A00001792

SECRETARY OF STATE

A SECOND STATE S

RECEIVED

to Articles of Incorporation of

CHARLEN	e renee	INC.	
(Name of Corporation as curr	ently filed with t	he Florida Dept. of State	<u>e</u>)
P0500	0137074		
	nber of Corporati	on (if known)	
Pursuant to the provisions of section 607.100 following amendment(s) to its Articles of Incomparison of the provisions of section 607.100 following amendment(s) to its Articles of Incomparison of the provisions of section 607.100 following amendment(s) to its Articles of Incomparison of the provisions of section 607.100 following amendment(s) to its Articles of Incomparison of the provisions of section 607.100 following amendment(s) to its Articles of Incomparison of the provisions of section 607.100 following amendment(s) to its Articles of Incomparison of the provision of the		es, this <i>Florida Profit C</i>	Corporation adopts the
A. If amending name, enter the new name of	f the corporation	<u>ı:</u>	
The new name must be distinguishable of "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name association," or the abbreviation "P.A."	"Inc.," or Co.,	" or the designation "C	orp," "Inc," or
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		MIAMI, FLOR	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)	CE BOX	13151 NW 11+1	
D. If amending the registered agent and/or new registered agent and/or the new regi			r the name of the
Name of New Registered Agent:	CHARLE	NE REY	
New Registered Office Address:	13151 NI (Florid	N 11th TERR	
	MIAMI	(City)	, Florida <u>FL</u> 33182 (Zip Code)
New Registered Agent's Signature, if changi			the abligations of the

Page 1 of 3

Signature of New Registered Agent, if changing

position.

40 14 12 18 2 14 14 14 60 W. Co.

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action	
PSD	WEST, CHARLENE R	14232 SW 8th ST. MIAMI FL. 33184	Add Remove	
PSD	REY, CHARLENE	13151 NW 11th TERR MIAMI, FL. 33182	Add Remove	
	·		Add Remove	
	ding or adding additional Articles, enter dditional sheets, if necessary). (Be spec			
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)				

'The date of each amendment(s)	adoption:
Effective date if applicable:	FEB 1st, 2009
	no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	st for the amendment(s) was/were sufficient for approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(v	oting group)
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
Dated <u>JA</u>	MARY 5th, 2009
Signature (Charlene Mest
(By a selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
_	CHARLENE R. WEST
	(Typed or printed name of person signing)
	(Title of person signing)
-	(Title of person signing)