

P05000152888

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

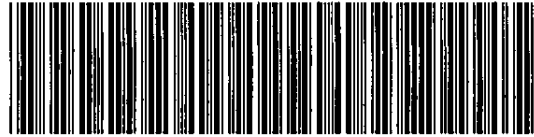
(Business Entity Name)

(Document Number)

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09/29/08--01018--025 **35.00

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08 OCT 31 PM 1:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*Amend
11/3/08*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Adams Recovery, Inc.

DOCUMENT NUMBER: P05000152888

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Paul Hoffer
(Name of Contact Person)

Adams Recovery, Inc.
(Firm/ Company)

4201 Kean Rd.
(Address)

Davie, FL 33314
(City/ State and Zip Code)

For further information concerning this matter, please call:

Paul Hoffer at (954) 654-2111
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☒ \$43.75 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
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 8, 2008

WILLIAM HOFFER
4201 KEAN RD
DAVIE, FL 33314

SUBJECT: ADAMS RECOVERY INC.
Ref. Number: P05000152888

We have received your document for ADAMS RECOVERY 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 current name of the entity is as referenced above. Please correct your document accordingly.

The document is illegible and not acceptable for imaging.

Section 607.0120(4), 617.01201, or 608.4081, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

Please list the street address of each officer/director.

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) 245-6916.

Carol Mustain
Regulatory Specialist II

Letter Number: 408A00053057

Articles of Amendment
to
Articles of Incorporation
of

Adams Recovery Inc.

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

P05000152888

(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:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

4201 Kean Rd.

Davie, FL 33314

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4201 Kean Rd.

Davie, FL 33314

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

Paul Hoffer

New Registered Office Address:

4201 Kean Rd.

(Florida street address)

Davie


(City)

Florida 33314

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



Signature of New Registered Agent, if changing

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TALLAHASSEE, FLORIDA

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>	<u>Address</u>	<u>Type of Action</u>
<u>Pres</u>	<u>William Hoffer</u>	<u>3810 SW 53rd St</u> <u>FT Lauderdale, FL 33312</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>VPres</u>	<u>Paul Hoffer</u>	<u>15026 SW 13th PL</u> <u>Sunrise, FL 33326</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Sec/Tr</u>	<u>Barbara Epel</u>	<u>3810 SW 53rd St</u> <u>FT Lauderdale, FL 33312</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

Also adding: as a Director Danny Adams 1220 NE 9th St.

Pompano Beach, FL 33060

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: 9/24/08

Effective date if applicable: 9/24/08
(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.

Signature 
(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)

DANIEL T ADAMS
(Typed or printed name of person signing)

DIRECTOR (PAST PRESIDENT)
(Title of person signing)

FILING FEE: \$35