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### Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 205-0380

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255
Phone: (305)634-3694
Fax Number: (305)633-9696

#### COR AMND/RESTATE/CORRECT OR O/D RESIGN

#### MARLIN REALTY SERVICES, INC.

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May 4, 2006

## FLORIDA DEPARTMENT OF STATE Division of Corporations

MARLIN REALTY SERVICES, INC. 1231 CAPE CORAL PKWY CAPE CORAL, FL 33904

SUBJECT: MARLIN REALTY SERVICES, INC.

REF: P05000155511

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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 Document Specialist FAX Aud. #: H06000124532 -- Letter Number: 306A00031789

OF HAY -5 AH 8: 00

P.O BOX 6327 - Tallahassee, Florida 32314

WYY-05-2006 16:28 EMPIRE CORP. P.01/05

# H00000174537



#### Articles of Amendment to Articles of Incorporation

Articles of Incorporation of		
MARYN ROMMY SERVICES INC.		
(Name of corporation at mateurity filed with the Florida Dept. of State)		
P.05000157711	143.	0
(Document number of corporation (if known)	- <del> </del>	NAM 30
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts following amendment(s) to its Articles of Incorporation:	ETAR)	17-5
NEW CORPORATE NAME (Hebaneige):		=
	77.05	SH O
(Must condain the word "corporation." "company," or "incorporated" or the abbreviation "Corp., " "Inc.," or "Co.")  (A profit " oal corporation must comein the word "characted", "profits innel association," or the abbreviation "F.A.")		58
AMENIOMENTS ABOPTED: (OTHER THAN NAME CHANGE) Indicate Artic e Number(s) and principle Title(s) being amended, added or deleted: (BE SPECIFIC)		
TELETE- HETTOLE VII SECRETARY TREASURER MICHAELS	CROGGIN.	3
DELEE- LEGISTERS AGONT - MICHAEL SCROGGINS		
100 - REGISTAREN AGENT - DAWN SCROGG	MS	
1231 CAPE GRAZ. PK	الإلمان	
CAPE GRAL FE. 3.	•	¢
ADD - SECRETARY / TREASURER - DRIVER SER OGSIN	is (	
1231 COPE CORPL	PKM	14
(Amach additional pages if accessary)	704	
If as am ment provides for exchange, replacefreetion, or cancellation of issued theres, provisions		
If at am ment provides for exchange, replacetion, or cancellation of issued shares, provisions for implement in on contained in the amendment itself: (if not applicable, indicate N/A	Ų	
	•	•
(amtiqued)		
f		

H0000012453e

[bt	date of each amoudment(s) adoption: MAY 2/2006
EØe	ctive date if applicable: MAY 3, 3-006
	(no more than 90 days after amendment file dam)
4.do	ption 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 emitted to vote separately on the amendment(s):
	"The number of votes cast for the amendment(s) was/were sufficient for approved by
	(voling group)
	The amendment(s) weatwess adopted by the board of directors without 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 firedor, president of other officer; is directors or officers have and been salestess by an incorpolator - if a the adapter of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	TAWN SCROBOWS (Typed or printed name of person signific)
	Title of person high inch

FILING FEE: \$35



# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

MAKUN REMON SERVICES TWO.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

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