## P05000156780

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: ARL	IGHNTON MANANGMENT CORPO	PRATION	
DOCUMENT NUMBER: P050001	56780		
The enclosed Articles of Amendment a	nd fee are submitted for filing.		
Please return all correspondence concer	rning this matter to the following:		
Nathaniel Bragg	· · · · · · · · · · · · · · · · · · ·		
	(Name of Contact Person)		
Arlington Capital N	Management Co.	<u></u> .	
	(Firm/ Company)		
1900 Van Buren St	#309		
	(Address)		
Holywood FL 33020	. •		
	(City/ State and Zip Code)		
For further information concerning this	matter, please call:		
Nathaniel Bragg	at ( 954 ) 880-0575		
(Name of Contact Person)	(Area Code & Daytime Teleph	none Number)	
Enclosed is a check for the following a	mount:		
☑\$35 Filing Fee ☐\$43.75 Filing Fee Certificate of Ste		I \$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

FILED

05 DEC 30 AM 10: 00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

## ARLIGHNTON MANANGMENT CORPORATION

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

	P05000156780
-	(Document number of corporation (if known)
	e provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> owing amendment(s) to its Articles of Incorporation:
NEW CORPO	ORATE NAME (if changing):
	ON CAPITAL MANAGEMENT Co.
Must contain the A professional c	e word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
	NTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s)
and/or Article	Title(s) being amended, added or deleted: (BE SPECIFIC)
·	
	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE
	· · · · · · · · · · · · · · · · · · ·
	(Attach additional pages if necessary)
If an amendm for implement	ent provides for exchange, reclassification, or cancellation of issued shares, provisions ting the amendment if not contained in the amendment itself: (if not applicable, indicate N/A

(continued)

The date of each amendment(s) adoption: 12/27/05
(no more than 90 days after amendment file date)
Adoption of Amendment(s) ( <u>CHECK ONE</u> )
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)
Nathaniel Bragg
(Typed or printed name of person signing)
President
(Title of person signing)

FILING FEE: \$35