P0600005614

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
,		
(Ci	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	,
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COVER LETTER

Division of Corporations	
NAME OF CORPORATION:	Le & Structuc.
DOCUMENT NUMBER: 260000	05614
The enclosed Articles of Amendment and fee are submitted	d for filing.
Please return all correspondence concerning this matter to	the following:
Mirian hez Name of Conta	act Person
Firm/ Con	pany
4010 Ducin	g ela2 et. #398
Destry FC	
City/ State and Optile In C E-mail address: (to be used for future a	e Hotmail com
For further information concerning this matter, please call Name of Contact Person At (: Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payab	, .
\$35 Filing Fee \$\ \text{S43.75 Filing Fee & \text{\$43} \text{Certificate of Status}}\$	75 Filing Fee & S52.50 Filing Fee tified Copy Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendment Section Amer Division of Corporations Divis P.O. Box 6327 Clifto Tallahassee, FL 32314 2661	t Address adment Section ion of Corporations in Building Executive Center Circle massee, FL 32301

Articles of Amendment

Articles of Incorporation

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

(Document Number of Corporation (if known)

wing

Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation:	•	a Profit Corporation adopts the	e follo
A. If amending name, enter the new name	of the corporation:		
			new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or th name must contain the word "chartered," "pi	he designation "Corp," "Inc," or	"Co". A professional corpor	
B. Enter new principal office address, if ap (Principal office address <u>MUST BE A STRE</u>			
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)			18 MAY - 4 PM
D. If amending the registered agent and/or new registered agent and/or the new reg		rida, enter the name of the	5: 29
Name of New Registered Agent:			
New Registered Office Address:	(Florida street addre	ss)	
		, Florida	_
	(City)	(Zip Code)	
New Registered Agent's Signature, if change I hereby accept the appointment as registered		ccept the obligations of the posi	tion.
·	Signature of New Registered Age	ent, if changing	

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>	Name	Address	Type of Action
SIDENT	Mirian A. Wezuer Jula Trana LS.	Ct. AH= 399 DESTINFL 32541	_ Æ Add □ Remove
· (CE /	Jula Trang LS.		_ □ Add □ Remove
			Add Remove
provision	ndment provides for an exchange, ress for implementing the amendment if applicable, indicate N/A)		
			•

Γhe date of each amendment	(s) adoption:	101281	10	
766-44 3-4-26121-1	(date of ad	option is requi	red)	
Effective date <u>if applicable</u> :	(no more than 90 days after a	mendment file	date)	
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. ere sufficient for approval.	The number of	of votes cast for the amer	ıdment(s)
	re approved by the shareholder d for each voting group entitle			
"The number of votes	cast for the amendment(s) was	were sufficien/	t for approval	
by Milt	an 185	,,,		
-	(voting group)			
The amendment(s) was/wer action was not required.	re adopted by the board of dire	ctors without s	hareholder action and sha	areholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators	s without share	holder action and shareho	older
Dated	0.28.10			
Signature	0.28.10 July Tran	ng J		
(By	a director, president or other of	officer – if dire	etors or officers have not	
	cted, by an incorporator – if in ointed fiduciary by that fiduciary by that fiduciary		receiver, trustee, or othe	r court
	1			
	MILTON L			
	(Typed or printed	l name of perso	on signing)	
	PRESID			
	(Title of person signi	ng)		