POWW/693/

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION:	CAMI	INVESTMEN	TI, INC.
DOCUMENT NUMBER:	060000.	16931	····
The enclosed Articles of Amend	<i>lment</i> and fee are s	ubmitted for filing.	
Please return all correspondence	concerning this m	atter to the following:	
AUDA	(Name of Co	16 HAI	
	TAVES	THENTS, INC	
	(Firm/C	,	
	(Ad	dress)	
MI AM	GARDEN	s, FL 33055	
	(City/ State	and Zip Code)	
For further information concerni	ng this matter, plea	ase call:	
Audhey JA (Name of Contact Pers	AGHAT son)	at (<u>786</u>) <u>200</u> (Area Code & Daytime	2-3976 Telephone Number)
Enclosed is a check for the follo	wing amount made	payable to the Florida Dep	partment of State:
\$35 Filing Fee \$43.75 F Certifica	iling Fee & te 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 Ci	rcle

Tallahassee, FL 32301

Articles of Amend to Articles of Incorpo of CAMT INVESTMENT (Name of Corporation as currently filed with the	ration 2009 APR 15 AM 11: 52 S. I. N. AMASSEE STATE
P06000/693	÷ •
(Document Number of Corporati	
Pursuant to the provisions of section 607.1006, Florida Statufollowing amendment(s) to its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the
A. If amending name, enter the new name of the corporation	<u>n:</u>
The new name must be distinguishable and contain the "incorporated" or the abbreviation "Corp.," "Inc.," or Co. "Co". A professional corporation name must contain association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	," or the designation "Corp," "Inc," or
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ado	
Name of New Registered Agent:	
New Registered Office Address: (Flori	da street address) , Florida

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

(City)

(Zip Code)

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)

Title	Name) .,	Address	Type
RECTOR	DEVIN B	45H	10218 LA	PUKEL KDOY
			DAVIES FL.	33528 D
	 			Q1 / Q1 !
E. <u>If amendi</u>	ng or adding additional A	rticles, enter	change(s) here:	
(attach add	itional sheets, if necessary,). (Be specif	Ic)	
	······ · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		·

	ndment provides for an e			
	s for implementing the a	<u>nendment if r</u>	<u>iot contained in the ai</u>	mendment itself:
(if not	applicable, indicate N/A)			
		····		
		··· , , , , , , , , , , , , , , , , , ,		

The date of each amendment(s) adoption:
Effective date if applicable:	4/8/09
	(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) e 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 ca	ast for the amendment(s) was/were sufficient for approval
by	voting group)
(1	voting 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	1/8/09 And Con Jag he -
(By a select	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 nted fiduciary by that fiduciary)
	AUDLEY JAGHAI (Typed or printed name of person signing)
	(Typed or printed name of person signing)
)	DIRECTOR.
·	(Title of person signing)