

P06000030835

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

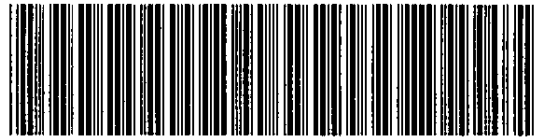
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09 JUL 23 AM 9:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend 7/23/09

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Fuzzy Brush Smile, Inc

DOCUMENT NUMBER: PO6000030835

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

Please return all correspondence concerning this matter to the following:

Vicki D. Pett
Name of Contact Person

Fuzzy Brush Smile
Firm/ Company

601 Highview Circle North
Address

Brandon, FL 33510
City/ State and Zip Code

fuzzybrushsmile@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vicki Pett at (813) 598-9650
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

July 17, 2009

VICKI D. PETTI
601 HIGHVIEW CIRCLE NORTH
BRANDON, FL 33510

SUBJECT: FUZZY BRUSH SMILE, INC
Ref. Number: P06000030835

We have received your document for FUZZY BRUSH SMILE, 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):

Please specify which article number and/or article title you are amending, adding, or deleting.

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: 109A00024654

Fuzzy Brushsmile, Inc
(Name of Corporation as currently filed with the Florida Dept. of State)

P 06 000030835

Page 1 of 3

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SECRETARY OF STATE
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>Vicki Petti</u>	<u>601 Highview Cir N</u> <u>Brandon FL</u> <u>33510</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>CFO</u>	<u>Paul Petti</u>	<u>601 Highview Cir N</u> <u>Brandon, FL</u> <u>33510</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Pres</u>	<u>Paul Petti</u>	<u>same as above</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>CFO</u>	<u>Vicki Petti</u>	<u>same as above</u>	<input checked="" type="checkbox"/> Remove <input type="checkbox"/> Add

E. If amending or adding additional Articles, enter change(s) here:
 (attach additional sheets, if necessary). (Be specific)

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: _____

07/20/09
(date of adoption is required)

Effective date if applicable: _____

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

☒ The amendment(s) was/were adopted 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)

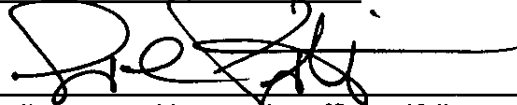
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated

07/20/09

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)

Paul Petti

(Typed or printed name of person signing)

CFO

(Title of person signing)