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\* Roberts NOV 11.6/2010

#### **COVER LETTER**

`TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION: Accounting	Solutions of NW Florid Inc	
DOCUMENT NUMBER: PO600004	4667	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
Luc'e Name	J. WOOD of Contact Person	
Accounti	na Solutions of NW Florida INC	
P.O. Box	1904 Address	
Santa Ros	a Bch FL 32459 State and Zip Clode	
Woodlucie a um E-mail address: (to be used for	future annual report notification)	
For further information concerning this matter, plea	ase call:	
Name of Contact Person	at (850) 687 - 5052 Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made	e payable to the Florida Department of State:	
☐ S35 Filing Fee	Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address	Street Address	
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle		

Tallahassee, FL 32301

### **Articles of Amendment**

## , to Articles of Incorporation

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Palana	204466	<u> </u>	JALLAHASSEE. FLORIE	c.
(Document Numb			SEE. FLORIE	A
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes	s, this <i>Florida Pre</i>	ofit Corporation adopts the	foll
A. If amending name, enter the new name of t	the corporation:			
			The	
name must be distinguishable and contain th abbreviation "Corp.," "Inc.," or Co.," or the a name must contain the word "chartered," "profe	lesignation "Cor	p," "Inc," or "Co	". A professional corpore	
B. Enter new principal office address, if appli (Principal office address MUST BE A STREET			<del></del>	
	<del>.</del>	·	- <del></del>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>E BOX</u> )	70 Ba	x 1904	
		SANTA FIORIZ	Rosa Beuch DA 32459	
D. If amending the registered agent and/or remember registered agent and/or the new registered.			enter the name of the	
Name of New Registered Agent:				
New Registered Office Address:	(Florida	a street address)		
_			, Florida	
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age			the obligations of the positi	on.
Sig	nature of New R	egistered Agent, 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
<u>VP</u>	William K. Beecher	103 Myssett Bayou Road Souta Rosa Beach, H	№ Add □ Remove □ 32459
			☐ Add ☐ Remove
			☐ Add ☐ Remove
	or adding additional Articles, enter clional sheets, if necessary). (Be specific		
			<del></del>
F. If an amen	dment provides for an exchange, recla	ssification, or cancellation of issu	ued shares,
if not a	for implementing the amendment if no pplicable, indicate N/A)	t contained in the amendment it	<u>seii:</u>
	- <del> </del>		

The date of each amendment(s	) adoption:	5 2010	
TP(C) - 4	(date of ado)	otion is required)	
Effective date <u>if applicable</u> :	no more than 90 days after am	andmeni îile daie)	
'		in the state)	
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were by the shareholders was/were		The number of votes cast for the amendment(s)	
		through voting groups. The following statement to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/w	rere sufficient for approval	
by		-77 	
(1	voting group)	<del></del>	
The amendment(s) was/were action was not required.	adopted by the board of direct	ors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators v	vithout shareholder action and shareholder	
Dated	1/5/2010	_ ,	
Signature CUCESTU DOG			
(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)			
	Lucie J	ame of person signing)	
-	(Title of person signing	lent	
(The of person signing)			