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Amera Sp



August 29, 2006

BOBBY BLACK P.O. BOX 702572 ST CLOUD, FL 34770

SUBJECT: BOBBY'S OUTDOOR SERVICES INC

Ref. Number: P06000073705

We have received your document for BOBBY'S OUTDOOR SERVICES 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):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

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) 245-6927.

Tracy Smith Document Specialist

Letter Number: 506A00052887

RECEIVED

6 OCT 12 AM 8: 00

Wilson of conferentions

COVER LETTER

NAME OF CORPORATION: Bobby 15 Outdoor Services INC. DOCUMENT NUMBER: P0 6000 73705 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Soloby Black
(Name of Contact Person) For further information concerning this matter, please call: 1800 Black
(Name of Contact Person) Enclosed is a check for the following amount: □\$35 Filing Fee ☐\$43.75 Filing Fee & ■\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

Division of Corporations

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

Bobby'S Outcle	OF Services Inc
(Name of corporation as currently file	ed with the Florida Dept. of State)
Poboooo 7370	95
(Document number of co	orporation (if known)
Pursuant to the provisions of section 607.1006, Florid adopts the following amendment(s) to its Articles of	
NEW CORPORATE NAME (if changing):	
(Must contain the word "corporation," "company," or "incorporation (A professional corporation must contain the word "chartered", AMENDMENTS ADOPTED- (OTHER THAN Name and/or Article Title(s) being amended, added or delet	"professional association," or the abbreviation "P.A.") AME CHANGE) Indicate Article Number(s)
Principal and mailing address has chan	ged TO:
PO Box 702572 (Mailing Address)	5145 Ralph Miller Rd. (Principal address)
St Cloud, FL 34770	St. Cloud, FL 34771
Registered Agents mailing address has ch	anged TO:
5145 Ralph Miller Rd	
St Cloud, FL 34771	TAS 06
	TEO PH
(Attach additional pa	iges if necessary)
If an amendment provides for exchange, reclassificate for implementing the amendment if not contained in the	ion, or cancellation of issued shares, provisions

(continued)

The date of each amendment(s) adoption: 8228
Effective date if applicable: (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
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)
(Typed or printed name of person signing)
Presiden Owner (Title of person signing)

FILING FEE: \$35