## PDUDDD8/U80

(Reguestade Nama)
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status

Special Instructions to Filing Officer: 9/12/07
Vanessa Ruiz Advised
to Add 2 Officers to Dicural Advised
About letter with
Another colous

Amend/Manuchs
CC/CUS

(10, 9.10.07



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09/04/07--01036--008 \*\*52.50



## **COVER LETTER**

**TO:** Amendment Section Division of Gorporations

NAME OF CORPORATION	: Miami Melts	, Inc.	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBER: PO	06000081686	······································	
The enclosed Articles of Amen	dment and fee are	e submitted for filing.	
Please return all correspondence	e concerning this	matter to the following:	
Ryan Lomax			
	(Name of	Contact Person)	
Miami Melts	, Inc.		
	(Firm	/ Company)	
14230 SW 17	'1 Terrace		·
	(/	Address)	
Miami, FL 331			
	(City/Stat	te and Zip Code)	
For further information concern	ning this matter, p	lease call:	
Ryan Lomax		at (_305)_903-700	
(Name of Contact Pe	rson)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for the following	owing amount:		
	Filing Fee & cate 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 Corporation P.O. Box 6327 Tallahassee, FL 32314	us	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ	cle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Miami Melts, Inc.  (Name of corporation as currently filed with the Florida Dept. of State)
(Name of corporation as currently filed with the Florida Dept. of State)
P06000081686
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
Allstars Learning Center, Inc.
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
Vanessa Ruiz (RA) resigns as registered agent. (Article VI ) 14230 SW 171 Terr. Miami, FI 331 7 100 Miami,
Vanessa Ruiz (D) resigns as director. (Article VII) 14230 SW 171 Terr. Miami, Fl 3317
Ryan Lomax as registered agent. (Article VI and VII) 14230 SW 171 Terr. Miami F) 33177
I, Ryan Lomax, am fimiliar with the obligations of the registered agent position.
Add: 5: Ivia Ruiz - Director
- Ryan Lomax - Director
14230 SW MTErr. MIAMINET 3317
If an amendment provides for 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)

(continued)

The date of each amendmen	t(s) adoption: September 1, 2007
Effective date if applicable:	September 1, 2007
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	was/were approved by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.
• •	was/were approved by the shareholders through voting groups. The at must be separately provided for each voting group entitled to vote numendment(s):
"The number of	of votes cast for the amendment(s) was/were sufficient for approval by
	(voting group)
and shareholder ac	was/were adopted by the board of directors without shareholder action etion was not required.  was/were adopted by the incorporators without shareholder action and was not required.
sclo	director, president or other officer - if directors or officers have not been sted, by an incorporator - if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)
<u>Ry</u>	an Lomax
	(Typed or printed name of person signing)
	Director
	(Title of person signing)

**FILING FEE: \$35**