## P06000082493

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
<u> </u>
(Business Entity Name)
, , ,
(Document Number)
Certified Copies Certificates of Status
Consideration As Ellins Office
Special Instructions to Filing Officer:

Office Use Only



100207929401

05/20/11--01049--011 \*\*43.75

M JUN 10 PH 2: 13
SECRETARY OF STATE

Amendment 06-10-11 De



May 31, 2011

GEORGE O'LEARY SKS CONSULTING OF SOUTH FLORIDA CORP. 6506 CONTEMPO LANE BOCA RATON, FL 33433

SUBJECT: SKS CONSULTING OF SOUTH FLORIDA CORP.

Ref. Number: P06000082493

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PAGE 2 OF 3 OF THE ARTICLES OF AMENDMENT WAS MISSING AT THE TIME WE RECEIVED YOUR DOCUMENT. PLEASE COMPLETE WITH ANY CHANGE OR LEAVE IT BLANK AND RETURN WITH YOUR DOCUMENT FOR FILING.

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) 245-6906.

Darlene Connell Regulatory Specialist II

Letter Number: 511A00013269

TI JUN 10 AM 8: 08
SECRETARY OF STATE

## **COVER LETTER**

**TO:** Amendment Section

Tallahassee, FL 32314

Division of Co	rporations		
NAME OF CORP	oration: <u>SKS</u>	Consulting of S	outh Florida Corp.
DOCUMENT NUM	MBER: <u>P0600</u>	0082493	
The enclosed Articl	es of Amendment and fee a	are submitted for filing.	
Please return all cor	respondence concerning thi	is matter to the following:	
_		Vame of Contact Person	· / /
-		ng of South Flo JFirm/Company	
_	6506 Contem	npo Lane Address	
		Address	
	Boca Raton A	Florida 33433	•
		ity/State and Zip Code  (SCONSV/Hing . V.S.  Indication)	
For further informat	ion concerning this matter,	please call:	
George	<del>-</del>	at ( 581 ) 843 · Area Code & Daytime Tel	3038 ephone Number
	for the following amount n	nade payable to the Florida Depar	tment 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 Ad		Street Address	
Amendment Section		Amendment Section Division of Corporations	
Division of Corporations P.O. Box 6327		Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to

· Articles of Inc.	orporation
of	
SKS Consulting of	South Florida Corp.
(Name of Corporation as currently filed with	the Florida Dept. of State)
P06000082493	
(Document Number of Corporat	ion (if known)
Pursuant to the provisions of section 607.1006, Florida Status amendment(s) to its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporatio	n: Sin I III
name must be distinguishable and contain the word "corpabhreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associations and the word "chartered," "professional associations and the word "chartered," "professional associations are must contain the word "chartered," "professional associations are must be distinguishable and contain the word "corp."	oration," "company," or "incorporated or the orp," "Inc," or "Co". A professional corporation attention," or the abbreviation "P.A."
B. Enter new principal office address, if applicable:	6506 Contempo Lane
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Boca Raton, Florida
	33433
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6506 Contempo Lane Boca Raton, Florida
	Boca Raton, Florida
	33933
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade	
	<del></del>
Name of New Registered Agent:	
6506 1	entemor lane

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

(Florida street address)

## 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	<u>Name</u>	Address	Type of Action
	NO CHANGE	<u></u>	□ Damaua
			☐ Add
<del></del>			
	ding or adding additional Articles  dditional sheets, if necessary). (Bi		
provisi	mendment provides for an exchanging the amendment applicable, indicate N/A)		
	NO OH	anges	

The date of each amendmen	t(s) adoption: 5/17/11
	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
• •	ere adopted by the shareholders. The number of votes cast for the amendment(s) tere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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	, n
	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
DatedSignature	5/17/11 Leorge O'Teany
(By	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	George O'Leary (Typed or printed name of person signing)
	President . (Title of person signing)