## P06000083363

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF COR	PORATION: FAMILIA EN	TERPRISES, INC	
DOCUMENT NU	MBER: P06000083363		
The enclosed Artic	cles of Amendment and fee ar	re submitted for filing.	
Please return all co	orrespondence concerning this	s matter to the following:	
JAII	RO GONZALEZ		
<del></del>	(Name o	of Contact Person)	
CC	NTAXGONZALEZ SERV	ICE, CORP	
	(Fin	m/ Company)	
414	2 W. Oakridge Rd Ste 102	2	
		(Address)	
Orla	ando, FL 32809		
	(City/ St	ate and Zip Code)	
For further inform	ation concerning this matter,	please call:	
JAIRO GONZALE	Z	at (407) _352-489	
(Nam	e of Contact Person)	(Area Code & Daytime	e Telephone Number)
Enclosed is a chec	k for the following amount:		
\$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)
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	ircle

## Articles of Amendment to Articles of Incorporation of



## FAMILIA ENTERPRISES, INC .

(Name of corporation as currently filed with the Florida Dept. of State)

P06000083363 (Document number of corporation (if known)
(Document number of corporation (II 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):
(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)
ARTICLE II PRINCIPAL OFFICE
THE NEW PRINCIPAL PLACE OF BUSINESS /MAILING ADDRESS IS:
3274 CANOE CREEK RD - ST. CLOUD, FL 34772
(Attach additional pages if necessary)
(Tituell additional pages II hostosally)
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 amendment(s) adoption:
Effective date if applicable: 07/05/2006
(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 chrectors 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)
TONY FAMILIA (Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

FILING FEE: \$35