## POUDOD099231

(Red	questor's Name)	
(Add	dress)	
(Add	iress)	
(City	//State/Zip/Phone	e #)
· P!CK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
· (Doc	cument Number)	<u> </u>
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



800136563868

10/06/08--01003--012 \*\*35.00

ng (ICT 31 PM 12: 52

Amand 11/3/08

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: EKD INVEST M. FEIN # 14-197	ent FIRM INC.
DOCUMENT NUMBER: POLODO99231	
The enclosed Articles of Amendment and fee are submitted for file	ing.
Please return all correspondence concerning this matter to the following	owing:
ERIKA Coplon (Name of Contact Person)	<del></del>
EKD Tovestheat F	ièm
2532 PARK Street	
JACKSONVILLE FL 36 (City/State and Zip Code)	2204
For further information concerning this matter, please call:	
Elika Coplow at (901) (Name of Contact Person) (Area Co	
Enclosed is a check for the following amount made payable to the	Florida Department of State:
\$35 Filing Fee \$\times \$43.75 Filing Fee & \$\times \$43.75 Filing Certified Cop (Additional cenclosed)	y Certificate of Status
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildiTallahassee, FL 323142661 Executive	Section orporations

Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 10, 2008

ERIKA K. COPLON E.K.D. INVESTMENT FIRM INC. 2532 PARK STREET JACKSONVILLE, FL. 32204

SUBJECT: E. K. D. INVESTMENT FIRM INC.

Ref. Number: P06000099231

We have received your document for E. K. D. INVESTMENT FIRM 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):

The document is illegible and not acceptable for imaging.

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 608A00053382

SEGRETARY OF STATE TELEGRIDA

7909 OCL 31 VH 8: 00

## Articles of Amendment to Articles of Incorporation

ON OF THE STATE OF

(Name of Corporation as currently filed with the Florida Dept. of State)  (POCODO 99 23)  (Document Number of Corporation (if known)  resuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adoptioning amendment(s) to its Articles of Incorporation:  If amending name, enter the new name of the corporation:  If amending nam	(Name of Corporation as currently filed with the Florida Dept. of State)  POLOGO 99 23  (Document Number of Corporation (if known)  result to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adoptioning amendment(s) to its Articles of Incorporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the word "corporation," "company," or corporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or corporated" or the abbreviation "P.A."  Enter new principal office address, if applicable:  Incipal office address MUST BE A STREET ADDRESS   Enter new mailing address MUST BE A STREET ADDRESS   If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent:  New Registered Office Address:  (City)  (City)  Florida  (City)  (Zip Code)		of	19/4
(Name of Corporation as currently filed with the Florida Dept. of State)  (POCOMENT Number of Corporation (if known)  (Pocument Number of Corporation (In known)  (Pocument Number of Corporation (In known)  (Pocument Number of Corporation (In known)  (Pocument Number of Corporation  (Pocument Numb	(Name of Corporation as currently filed with the Florida Dept. of State)  POLOGO 99 23  (Document Number of Corporation (if known)  result to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adoption amendment(s) to its Articles of Incorporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the word "corporation," "company," or corporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or corporated" or the abbreviation "P.A."  Enter new principal office address, if applicable:  Incipal office address MUST BE A STREET ADDRESS   Enter new mailing address MUST BE A STREET ADDRESS   If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent:  New Registered Office Address:  (City) (Zip Code)	EKD LUVESTNEW	T FIRM TUC	· M
If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Office Address:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the new registered office address in Florida, enter the name of the new registered Office Address:  If amending the registered Agent:  New Registered Office Address:  (Florida street address)  Florida  Florida	If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," 'Inc.," or Co.," or the designation "Corp.," 'Inc	(Name of Corporation as curre	ntly filed with the Florida Dept. o	
If amending the registered agent and/or registered office address:  Name of New Registered Office Address:  If amending the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adoption adoption and contain the section of the provision of the corporation.  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the new registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent:  New Registered Office Address:  (Florida street address)  Florida	resuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adoptowing amendment(s) to its Articles of Incorporation:  If amending name, enter the new name of the corporation:  e new name must be distinguishable and contain the word "corporation," "company," or corporated" or the abbreviation "Corp., "Inc.," or Co.," or the designation "Corp.," "Inc.," or or 'or 'or the designation "Corp.," "Inc.," or or 'or the abbreviation "P.A."  Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS )  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent:  New Registered Office Address: (Florida street address)  Florida (City)  Florida  (City)  Florida  (City)	<u>louooon</u> 99	231	
e new name must be distinguishable and contain the word "corporation," "company," or necorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or Sociation," or the abbreviation "P.A."  Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent:  New Registered Office Address: (Florida street address)	If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending mame, enter the new name of the corporation:  If amending mame, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the name of the new registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent:  New Registered Office Address:  (City)  If amending the registered Agent:  New Registered Office Address:  (Florida street address)  Florida (City)  Florida	(Document Num	ber of Corporation (if known)	<del></del>
The new name must be distinguishable and contain the word "corporation," "company," or necorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or Co.". A professional corporation name must contain the word "chartered," "professional sociation," or the abbreviation "P.A."  Enter new principal office address, if applicable:  rincipal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent:  New Registered Office Address:  (Florida street address)	Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent:  New Registered Office Address:  (Florida street address)  Florida (City)  Florida (Zip Code)	rsuant to the provisions of section 607.1006 llowing amendment(s) to its Articles of Incorp	i, Florida Statutes, this <i>Florida Papar</i> poration:	rofit Corporation adopts
If amending the registered agent and/or registered office address in Florida, enter the name of the new registered Agent:  New Registered Office Address:  (Florida street address)  (Corp., "Inc.," or Co.," or the designation "Corp.," "Inc.," or the word "chartered," "professional the word "chartered," "profe	If amending the registered agent and/or registered office address in Florida, enter the name of the new registered Agent:  New Registered Office Address:  New Registered Office Address:  (City)  (Professional corporation name must contain the word "chartered," "professional the wor	If amending name, enter the new name of	the corporation:	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent:  New Registered Office Address:  (Florida street address)  Florida	Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent:  New Registered Office Address:  (Florida street address)  , Florida (City)  (Zip Code)	ncorporated" or the abbreviation "Corp.,"	"Inc.," or Co.," or the designati must contain the word "char	ion "Corp," "Inc," or tered," "professional
If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent:  New Registered Office Address:  (Florida street address)  , Florida	(Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent:  New Registered Office Address:  (Florida street address)  , Florida (City)  (Zip Code)		icable: 053 (ADDRESS) (JACK)	2 Park Stre SONVILLE, FL32
Name of New Registered Agent:  New Registered Office Address:  (Florida street address)  , Florida	Name of New Registered Agent:  New Registered Office Address:  (Florida street address)  , Florida  (City)  (Zip Code)	Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	CE BOX)	
Name of New Registered Agent:  New Registered Office Address:  (Florida street address)  , Florida	Name of New Registered Agent:  New Registered Office Address:  (Florida street address)  , Florida (City)  (Zip Code)			
New Registered Office Address: (Florida street address) , Florida	New Registered Office Address: (Florida street address) , Florida (City) (Zip Code)			, enter the name of the
, Florida	(City), Florida_ (Zip Code)	Name of New Registered Agent:		
	(City) (Zip Code)	New Registered Office Address:	(Florida street address)	<del></del>
(City) (Zin Code)	•			
(Sily) (Elp Coule)	w Registered Agent's Signature, if changing Registered Agent		(City)	(Zip Code)
w Registered Agent's Signature, if changing Registered Agent:	hereby accept the appointment as registered agent. I am familiar with and accept the obligations			

•

Signature of New Registered 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)

Title	Name (	Address	Type of Action
Y <u>reside</u> nt V <u>ice Pris</u> ident	Erika (oplon)  Michael Dahn  office	B352 PARKST. JACKSONVILLE FL 33304	Add Remove DO NOT CHANGE Add Remove  Add Add Add Add Add
	g or adding additional Articles, enter of tional sheets, if necessary). (Be specific	Yulee FL 32097 Change(s) here:	e □ Remove
ond	vice President for	thn as 490 e EKD Investa	o Owner uent
*Drusid	Po to 51%.	will be chauged	- From
provisions	ndment provides for an exchange, recla for implementing the amendment if napplicable, indicate N/A)	assification, or cancellation of is ot contained in the amendment	sued shares, itself:

The date of each amendment(s) adoption: $\frac{6/30/08}{}$
Effective date if applicable: 6/30/08
(no more than 90 days after amendment file date)
(CUPCI ONE)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted 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)
(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.
Dated 10/28/08
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)
Erika Coplon (Typed or printed name of person signing)
(Typed or printed name of person signing)
President
(Title of person signing)