

P06000101157

(Requestor's Name)

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PICK-UP WAIT MAIL

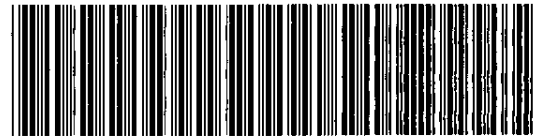
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12 JAN 11 PM 3:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Handwritten signature



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 15, 2011

HECTOR M. DE JESUS
THE LAW FIRM OF DE JESUS & ASSOCIATES
P O BOX 740656
ORANGE CITY, FL 32774-0656

SUBJECT: THE LAW FIRM OF DE JESUS & ASSOCIATES, P.A.
Ref. Number: P06000101157

We have received your document for THE LAW FIRM OF DE JESUS & ASSOCIATES, P.A. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 711A00027989



The Law Firm of
Hector M. de Jesus, P.A.

Attorney at Law

1-9-2012

Please find the
signed Adoption of
Amendment as required.

Hector M. de Jesus

RECEIVED

12 JAN 11 AM 8:45

TALLAHASSEE, FLORIDA

P.O. Box 740656 Orange City, Florida 32774-0656

Phone: (386) 228-9967

Fax 1-321-249-0501

E-mail: hector@lawdejesus.com

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: The Law Firm of de Jesus & Associates, P.A.

DOCUMENT NUMBER: 06 000101157

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Hector M. de Jesus
Name of Contact Person

The Law Firm of de Jesus & Associates, P.A.
Firm/ Company

P.O. Box 740656
Address

Orange City FL. 32774-0656
City/ State and Zip Code

hector @ law de Jesus .com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Hector M. de Jesus at (407) 704-0016
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|--|--|--|--|

Mailing Address
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

The Law Firm of de Jesus & Associates P.A.
(Name of Corporation as currently filed with the Florida Dept. of State)

06000101157
(Document Number of Corporation (if known))

FILED
12 JAN 11 PM 3:58
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The Law Firm of Hector M. de Jesus P.A.
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

1278 maximilian ST.
De Hona FL. 32725

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 740656
Orange City FL.
32774-0656

D. 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: _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

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

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

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

<u>Title(s)</u>	<u>Name</u>	<u>Address</u>
1) _____	_____	_____ _____ _____
2) _____	_____	_____ _____ _____
3) _____	_____	_____ _____ _____
4) _____	_____	_____ _____ _____
5) _____	_____	_____ _____ _____
6) _____	_____	_____ _____ _____

If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:

<u>Title(s)</u>	<u>Name</u>	<u>Title(s)</u>	<u>Name</u>
1) _____	_____	4) _____	_____
2) _____	_____	5) _____	_____
3) _____	_____	6) _____	_____

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

A series of horizontal lines for text entry, with a large diagonal line drawn across the page from the bottom left to the top right, indicating that the section is unused.

F. If an amendment provides for an 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)

The date of each amendment(s) adoption: 12-28-11

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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 Hector M. de Jesus
(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 12-28-11
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)

Hector M. de Jesus
(Typed or printed name of person signing)

Pres: de J.
(Title of person signing)