

PO6000102462

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

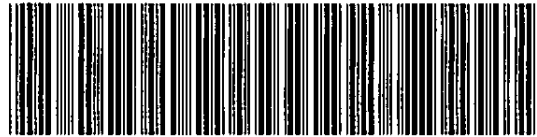
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

And a/son

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** A & C Enterprises and Development of Central Fl Inc

**DOCUMENT NUMBER:** P0600010246

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

Please return all correspondence concerning this matter to the following:

Frank T. Allen, Esquire

Name of Contact Person

The Allen Firm, P.A.

Firm/ Company

605 E. Robinson Street #130

Address

Orlando, FL 32801

City/ State and Zip Code

allenf551@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Frank T. Allen, Esq

Name of Contact Person

at ( 407 )

697-1932

Area Code & Daytime Telephone Number

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

A & C Enterprises and Development of Central Florida, Inc.

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

-P0600010246 PO 6000102462

(Document Number of Corporation (if known))

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:**

NA

*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)

3377 Tabreeze Court

Ocoee, FL 34761

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

3377 Tabreeze Court

Jacksonville, FL

Ocoee, FL 34761

32207

1401 Riverplace Blvd

#2811

**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:

NA

NA

New Registered Office Address:

(Florida street address)

NA

(City)

Florida NA

(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.

NA

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>P</u>	<u>Dawn Carter</u>	<u>1401 Riverplace Blvd #2811</u> <u>Jacksonville, FL 32207</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>P</u>	<u>Yolanda Rose</u>	<u>4026 Battleground Avenue #3B</u> <u>Greensboro, NC 27410</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>T &amp; S</u>	<u>Lakeshia Logan</u>	<u>3161 Loretto Road</u> <u>Jacksonville, FL 32223</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

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

NA

**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)

Reclassification of 1,000 shares are as follows: Yolanda Rose 51% or 510 shares, Lakeshia Logan 39% or 390 shares, and Frank Allen 10% or 100 shares.

The date of each amendment(s) adoption: 09/11/2009

(date of adoption is required)

Effective date if applicable: 09/11/2009

(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 \_\_\_\_\_."  
(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 09/11/2009

Signature

Yolanda Rose  
(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)

Yolanda Rose

(Typed or printed name of person signing)

President

(Title of person signing)