

PO6000106885

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

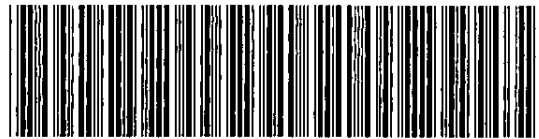
(Document Number)

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12/19/08--01017--004 **43.75

FILED

2009 JAN 26 PM 1:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend + N/C

TB

127.09

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CTF MOBILE NOTARY SIGNING AGENT INC

DOCUMENT NUMBER: P06000106885

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

Please return all correspondence concerning this matter to the following:

CATHERINE T. FILIPELLO
(Name of Contact Person)

WATSON REALTY CORP
(Firm/ Company)

8235 CHAMPIONS GATE BLVD
(Address)

DAVENPORT FL 33896
(City/ State and Zip Code)

For further information concerning this matter, please call:

CATHERINE T FILIPELLO at (407) 844-7158
(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:

☐ \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 24, 2008

CATHERINE T. FILIPELLO
WATSON REALTY CORP
8235 CHAMPIONS GATE BLVD
DAVENPORT, FL 33896

SUBJECT: CTF MOBILE NOTARY SIGNING AGENT, INC.
Ref. Number: P06000106885

We have received your document for CTF MOBILE NOTARY SIGNING AGENT, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check only one box on the amendment form regarding the adoption of the amendment.

When changing the name of a corporation filed pursuant to chapter 607, Florida Statutes, to that of a professional service corporation filed pursuant to chapter 621, Florida Statutes, the specific business purpose must also be added or changed to indicate what type of professional service the corporation will be rendering.

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) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 308A00061660

RECEIVED
2009 JAN -9 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 13, 2009

CATHERINE T. FILIPELLO
WATSON REALTY CORP
8235 CHAMPIONS GATE BLVD
DAVENPORT, FL 33896

SUBJECT: CTF MOBILE NOTARY SIGNING AGENT, INC.
Ref. Number: P06000106885

We have received your document for CTF MOBILE NOTARY SIGNING AGENT, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

When changing the name of a corporation filed pursuant to chapter 607, Florida Statutes, to that of a professional service corporation filed pursuant to chapter 621, Florida Statutes, the specific business purpose must also be added or changed to indicate what type of professional service the corporation will be rendering.

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) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 609A00001104

RECEIVED
2009 JAN 26 AM 8:00
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Articles of Amendment
to
Articles of Incorporation
of

FILED
2009 JAN 26 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CTF MOBILE NOTARY SIGNING AGENT, INC.

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

P06000106885

(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:

CATHERINE T. FILIPPELLO, ~~THE~~ 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)

8235 CHAMPIONS GATE BLVD
DAVENPORT FL 33896

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

NA

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:

CATHERINE T. FILIPPELLO

New Registered Office Address:

8235 CHAMPIONS GATE BLVD

(Florida street address)

DAVENPORT

(City)

33896
(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.

Catherine T. Filippello

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>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input 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)

THE PURPOSE IS TO DISOLVE "CTF MOBILE NOTARY SIGNING
 AND CHANGE" AGENT INC^A TO "CATHERINE T. FILIPPO, P.A." IS NOW
 TO BE IN THE REAL ESTATE BUSINESS AS A REAL
 ESTATE ASSOCIATE

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)

N/A

The date of each amendment(s) adoption: DECEMBER 15, 2008

Effective date if applicable: JANUARY 1, 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 1/3/09

Signature Catherine T. Filippello
(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)

CATHERINE T FILIPPELLO
(Typed or printed name of person signing)

DIRECTOR, PRESIDENT
(Title of person signing)