## P0600121489

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SECRETARY OF STAT LL'AHASSEE, FLORI

NOY 30 AM 9: 39

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	TION: <u>JERRY BONE</u>	INC.	<del> </del>
DOCUMENT NUMBER	P06000121489		
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.	
Please return all correspon	ndence concerning this ma	atter to the following:	
	DEBRA PALMER		
	Name o	of Contact Person	
	PALMER ACCOUNT	ING & BOOKKEEPING S	VC. INC.
	Fir	m/ Company	
	P.O. BOX 60302		
		Address	
	FT. MYERS, FL	33906	-
* * * * *	City/ St	tate and Zip Code	
	SQUEEGY54@aol		
	E-mail address: (to be used for	future annual report notification)	· · · · · ·
For further information co	oncerning this matter, plea	se call:	
JERRY BONE		at (239 ) 246-039	1
Name of Conta	act Person	Area Code & Daytime Tele	·····
Enclosed is a check for the	e following amount made	payable to the Florida Departs	ment of State:
	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 Corpor P.O. Box 6327 Tallahassee, FL 32	rations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	·

## **Articles of Amendment** to **Articles of Incorporation** of

	to ticles of Incorporation of	2009 NOV 30 AM 9
JERRY BONE INC	of  ly filed with the Florida Dept. of State)  er of Corporation (if known)	2009 NOV 30
(Name of Corporation as current	ly filed with the Florida Dept. of State)	FALECRE TO AM 9
P06000121489		"LLAHASSEE STAN
(Document Number	er of Corporation (if known)	- C. FLORIE
rursuant to the provisions of section 607.1006, imendment(s) to its Articles of Incorporation:		
. If amending name, enter the new name of the	ne corporation:	
JERRY BONE PAI	NTING, INC.	The new
Principal office address <u>MUST BE A STREET A</u> 2. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE</u>		
D. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered Agent:	istered office address in Florida, enter red office address:	the name of the
New Registered Office Address:	(Florida street address)	
		Florida
_	(City) (Zip C	

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, 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>	Address	Type of Action
<del></del>			
	mending or adding additional Articles ch additional sheets, if necessary). (B		
F. If	an amendment provides for an exchan ovisions for implementing the amendn (if not applicable, indicate N/A)	ige, reclassification, or cancel nent if not contained in the an	ation of issued shares, nendment itself:

,The date of each amendment(s	) adoption: <u>NOV. 10, 2009</u>
77.00 (1 ) A (0 ) A (1 )	(date of adoption is required)
Effective date <u>if applicable</u> :	no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	voting group)
(1	voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated/	23-09 Lup Bre
Signature	Sup Bre
(By a select	director, president or other officer – if directors or officers have not been ed/by an incorporator – if in the hands of a receiver, trustee, or other court
	nied fiduciary by that fiduciary)
	JERRY BONE
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)