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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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FLORIDA COMPLIANCE SPECIALISTS, INC.



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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

)
	1. Florid	orporation Name) A INVESTMENT AND Mortgage INC Operation Name) (Document #) PO6000138814
	2	orporation Name) (Document #)
	3	orporation Name) (Document #)
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	(0	orporation Name) (Document #)
	Walk in	Pick up time 2/8/07
	Mail out	Will wait Photocopy Certificate of Status
	new fillings	AMENDMENTS - :
	Profit	i Amendment
	NonProfit	Resignation of R.A., Officer/ Director
	Limited Liability	Change of Registered Agent
	Domestication	Dissolution/Withdrawal
	Other	Merger
120112		
	OTHER FILINGS	REGISTRATION/* QUALIFICATION
	Annual Report	
	Fictitious Name	Foreign
	Name Bearing	Limited Partnership

Reinstatement

Trademark

Other

Examiner's Initials	
	<u> </u>

Articles of Amendment Articles of Incorporation

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(continued)

The date of each amendment(s) adoption:
Effective date if applicable: 01/09/2007 Zt
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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.
Signature (By a director, president or other officer - if directors of officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
WELIDA RODRIGUEZ. (Typed or printed name of person signing)
(Typed or printed name of person signing)
auner .
(Title of person signing)

FILING FEE: \$35