

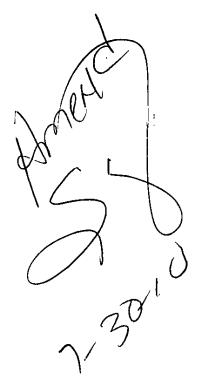
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SECRETARY STATE

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COVER LETTER

'TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	CFAA, Inc	
DOCUMENT NUMBER:		P070000434	130
The enclosed Arti	cles of Amendment and fee a	e submitted for filing.	
Please return all c	orrespondence concerning th	matter to the following:	
	Sandra L Brusso		
	N	me of Contact Person	
		CFAA, Inc	
		Firm/ Company	
P. O. Box 20161			
		Address	
	Tan	oa, FL 33622-0161	
		y/ State and Zip Code	
	sandybru	sso@hotmail.com for future annual report notificati	(on)
	L-man address. (to be use	tor rature annual report normeati	i i
For further inform	ation concerning this matter,	lease call:	
5	Sandra L Brusso	at (813)	260-6885
Name	e of Contact Person	Area Code & Daytim	ne Telephone Number
Enclosed is a chec	k for the following amount n	ide payable to the Florida D	epartment of State:
□ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclose	Certificate of Status
Mailing A	<u>ddress</u>	Street Address	
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporation	IS .
P.O. Box 6		Clifton Building	a: .
Tallahasse	e FL 32314	2661 Executive Center (Circle

Tallahassee, FL 32301

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

2010 JUL 30 PH 3: 38
TALLAHASSEE, FLORIDA

CFAA, Inc	_
(Name of Corporation as currently filed with the Florida Dept. of State)	_
P07000043430	

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the follo
A. If amending name, enter the new name of the corporation	on:
name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associ	Corp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	P. O. Box 20161
	Tampa, FL 33622-0161
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent:	
New Registered Office Address: (Flor	ida street address)
 	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered A language languag	
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
Pres	Martyn R Jones	5215 S Crescent Dr Tampa, FL 33611	☐ Add ☑ Remove
Dir/P	Sandra L Brusso	5215 S Crescent Dr Tampa, FL 33611	☑ Add □ Remove
Dir/S	Brandon L McDaniel	1854 Princeton Dr Clearwater, FL 33765	
(ander a	dditional sheets, if necessary). (Be s		
provisi	nendment provides for an exchange ons for implementing the amendment of applicable, indicate N/A)		

The date of each amendment(s)	adoption: July 26, 2010			
_	(date of adoption is required)			
*Effective date if applicable: (no more than 90 days after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were as by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.			
	pproved by the shareholders through voting groups. The following statement or 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	*			
(vo	ting group)			
The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder			
The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder			
Dated July 28,	, 2010			
Signature <u></u>	Andered Bruss			
	irector, president or other officer - if directors or officers have not been			
	d, by an incorporator – if in the hands of a receiver, trustee, or other court led fiduciary by that fiduciary)			
	Sandra L Brusso			
	(Typed or printed name of person signing)			
	Director/President			
_	(Title of person signing)			