# P07000052850

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Document Number)
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11 AUG 22 AM 9: 53
SEGRETARY OF STATE
AHASSEE FLOND

Amend Thereis 8,23-11

#### **COVER LETTER**

**TO:** Amendment Section

Division of Corporations	
NAME OF CORPORATION: Promot	ivater INC
DOCUMENT NUMBER: P07000	50850
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning t	his matter to the following:
SHAROW S	Name of Contact Person
Promotivater	TルC Firm/ Company
1322 E E	Address
	City/ State and Zip Code
	sed for future annual report notification)
For further information concerning this matter	r, please call:
Sharon S Taylor Name of Contact Person	at (727) 943 5835 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount	made payable to the Florida Department of State:
\$35 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 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



RECEIVED

11 AUG 22 AM 8: 29

SECRETARY OF STATE
FALLAHASSEE, FLORIDA

August 9, 2011

SHARON S. TAYLOR PROMOTIVATER, INC. 1322 EAST BOYER ST. TARPON SPRINGS, FL 34689

SUBJECT: PROMOTIVATER, INC.

Ref. Number: P07000052850

We have received your document for PROMOTIVATER, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

I am not sure of what's being filed. Attached is a computer printout showing you filed the Fictitious Name with the corporation as the owner.

The amendment should be filed to remove Allen R. Taylor as Mr, and to add Sharon S. Taylor as President.

Please delete part A. - 8 - 17 - 11 Done

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) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 911A00018725



RECEIVED

11 AUG -8 AM II: 52

SECRETARY OF STATE JALLAHASSEE, FLORIDA

### FLORIDA DEPARTMENT OF STATE Division of Corporations

July 20, 2011

SHARON S. TAYLOR PROMOTIVATER, INC. 1322 EAST BOYER ST. TARPON SPRINGS, FL 34689

SUBJECT: PROMOTIVATER, INC.

Ref. Number: P07000052850

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

PLEASE PROVIDE A TITLE FOR THE NEW OFFICER BEING ADDED TO THE CORPORATION. A SAMPLE OF ACCEPTABLE TITLES ARE PRESIDENT, V. PRESIDENT, SECRETARY, TREASURER, OR DIRECTOR.

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) 245-6906.

Darlene Connell Regulatory Specialist II

Letter Number: 011A00017183

#### **Articles of Amendment**

## · Articles of Incorporation of

	of	FILED
Promotivater,	INC.	11 AUG 22 AM S
(Name of Corporation as curr	rently filed with the Florida Dep	ot. of State) Store
P 07 0000	PS2850	SECRETARY OF STANLAHASSEE FLO
(Document Nur	mber of Corporation (if known)	
uant to the provisions of section 607.100 adment(s) to its Articles of Incorporation:	06, Florida Statutes, this <i>Florida</i>	Profit Corporation adopts the fo
f amending name, enter the new name o	of the corporation:	
	•	
e must be distinguishable and contain eviation "Corp.," "Inc.," or Co.," or the must contain the word "chartered," "pro	e designation "Corp," "Inc," or ofessional association," or the al	"Co". A professional corporation
Enter new principal office address, if appactual office address <u>MUST BE A STREE</u>		
	<del></del>	
		<del>.</del>
Enter new mailing address, if applicable Mailing address <u>MAY BE A POST OFFI</u>		
Mailing address <u>MAY BE A POST OFFI</u> f amending the registered agent and/or i	registered office address in Flor	ida, enter the name of the
Mailing address <u>MAY BE A POST OFFI</u>	registered office address in Flor	ida, enter the name of the
Mailing address <u>MAY BE A POST OFFI</u> f amending the registered agent and/or i	registered office address in Flor	ida, enter the name of the
Mailing address <u>MAY BE A POST OFFI</u> f amending the registered agent and/or a learn that the registered agent and/or the new registered agent agent and/or the new registered agent a	registered office address in Flor	ida, enter the name of the
Mailing address MAY BE A POST OFFI  f amending the registered agent and/or a  ew registered agent and/or the new region  Name of New Registered Agent:	registered office address in Floristered office address:	
Mailing address <u>MAY BE A POST OFFI</u> f amending the registered agent and/or a learn that the registered agent and/or the new registered agent agent and/or the new registered agent a	registered office address in Flor	s)
Mailing address MAY BE A POST OFFI  f amending the registered agent and/or a  ew registered agent and/or the new region  Name of New Registered Agent:	registered office address in Floristered office address:	

## 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
MR	Allen	R TAYLOR	TORPON SPAINGS FL 34689	Add Remove
Pres	SHORON	S Taylor	1322 & Bayers4 TORPON SPLINGS FL 34689	Add Remove
<del></del>	<del></del>			Add Remove
		dditional Articles, enter f necessary). (Be speci		
F. <u>If an ar</u>	nendment provid	les for an exchange, rec	lassification, or cancellation of iss	ued shares.
<u>provisi</u>	ons for implement oot applicable, ind	<u>iting the amendment if i</u>	not contained in the amendment i	tself:
		-		,
				· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s	adoption:	July 1	2011
. •		(date of adoption i	is required)
Effective date <u>if applicable</u> :	(no more than 90 d	days after amendm	ent file date)
Adoption of Amendment(s)	(CHE)	CK ONE)	
The amendment(s) was/were by the shareholders was/wer	adopted by the she sufficient for app	pareholders. The no	umber of votes cast for the amendment(s
			gh voting groups. The following statement esperately on the amendment(s):
"The number of votes ca	ist for the amendin	nent(s) was/were su	ufficient for approval
by			
(	voting group)		
The amendment(s) was/were action was not required.	adopted by the bo	oard of directors wi	ithout shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the in-	corporators withou	it shareholder action and shareholder
Dated	6-30-11 Sayu		
(By a select	director, presiden	t or other officer – ator – if in the han	if directors or officers have not been ds of a receiver, trustee, or other court
	SHARON	S TA-	410R
	(Typed	I or printed name o	of person signing)
	Preside	ont	
	(Title of pe	erson signing)	