## P07000002714

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
. (Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
·	

Office Use Only



400247749904

05/10/13--01020--017 \*\*35.00

13 MAY 10 AM 11: 09





MAY 18 ZORS

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: POTOOO  DOCUMENT NUMBER: POTOO	Clay Productions, Inc
The enclosed Articles of Amendment and fee are submitted	I for filing.
Please return all correspondence concerning this matter to t	he following:
Ilysa G Polymen C	ne of Contact Person  Law Frod Uctions - Qh C Firm/ Company
- Polymer Cl	Address Place Branford, FL 32008 State and Zip Code  Out pod Cast Q yahoo. Confuture annual report notification)
For further information concerning this matter, please call:	
Tysa Ginsburg Name of Contact Person	at (386) 935-2058 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable	to the Florida Department of State:
Certificate of Status Ce	3.75 Filing Fee & S52.50 Filing Fee rtified Copy Certificate of Status dditional copy is Certified Copy closed) (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

FILED SECRETARY OF STATE TALL AHASSEE, FLORIDA

## **Articles of Amendment**

to

13 MAY 10 AM 11:09

Articles of Incor	poration
Polymer Clay Prod (Name of Corporation as currently filed with the Flor	octions, Inc
POTODO DO GATI V  (Document Number of Corporation (if k	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:  The property of the corporation of the corporat	
word "chartered," "professional association," or the abbreviation "P	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NA
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 new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	address)
New Registered Office Address:	, Florida
(City)	'(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with	
Signature of New Registered Age	ent, 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change		<u>NA</u>	
Add			
Remove			
2) Change		NA	
Add			
Remove		. \ .^	<del></del>
3 ) Change		_ NA	
Add			
Remove			
4) Change		NA	
Add			
Remove			
5) Change		NA	
Add			
Remove			<del></del>
6) Change		NA	
Add			
Remove			

. If amending or adding additional Arti (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
MA	
<del>-</del> ·	
	·- ·· · · · · · · · · · · · · · · · · ·
	<del></del>
······································	
<ul> <li>If an amendment provides for an exch provisions for implementing the ame</li> </ul>	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	<del></del>
	<del></del>
·	

The date of each amendment(s) adoption: May 3, 2013
Effective date if applicable: May 3, 2013
(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 May 3, 2013
Signature Im
(By a firector, prosident 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)
Ilysa Ginsburg
(Typed or printed name of person signing)
President
(Title of person signing)