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SECRETARY OF STATE

ALLAHASSEE, FLORID

Mr. 1/20

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORE	PORATION: Lond	ale Holdings Gr	oup. Inc
DOCUMENT NU	мвек: <u>Р07000</u>	090186	·
The enclosed Artic	eles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	s matter to the following:	
	Derek L	ame of Contact Person	
	Londale	Holdings Group	Inc.
	110 East	Broward Blyc Address	Ste. 1710
•	Ft. Lauderdo	le Florida ity/ State and Zip Code	<u>3330 (</u>
	DDavis IHG @ C E-mail address: (to be used	d for future annual report notification)	
For further informa	ation concerning this matter,	please call:	
Derc	k Davis	at (954) 980-	2928
Name	of Contact Person	Area Code & Daytime Te	lephone Number
Enclosed is a check	k for the following amount m	nade payable to the Florida Depar	tment of State:
≦ \$35 Filing Fee	☐ \$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 Ad Amendmer		Street Address Amendment Section	AHN: Carol Mus

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

to,

Artic	les of Incorpor of	ation		
LONDALE HO		GROUP,	INC.	
(Name of Corporation as currently		orida Dept. of State	<u> </u>	
P07000090186	,			
(Document Number o		known)		
Pursuant to the provisions of section 607.1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes, th	is <i>Florida Profit Co</i>	orporation adopt	s the following
A. If amending name, enter the new name of the o	corporation:			
name must be distinguishable and contain the wabbreviation "Corp.," "Inc.," or Co.," or the designame must contain the word "chartered," "professio	mation "Corp,"	"Inc," or "Co". A	r "incorporated professional co	The new i" or the rporation
B. <u>Enter new principal office address, if applicable</u> (Principal office address <u>MUST BE A STREET AD</u>		· · · · · · · · · · · · · · · · · · ·	TAL	09
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>		LAHASSEE, FLORIDA	FILED JUL 23 AM 9: 31
D. If amending the registered agent and/or registered new registered agent and/or the new registered		ss in Florida, enter	the name of the	<u>}</u>
Name of New Registered Agent:				·
New Registered Office Address:	(Florida str	eet address)		
	(City)	Zip (Florida Code)	
New Registered Agent's Signature, if changing Repeated hereby accept the appointment as registered agent.	gistered Agent: I am familiar w	ith and accept the ob	oligations of the p	osition.
Signati	u e oj ivew regisi	tered Agent, if chang	ang	

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>	<u>Address</u>	Type of Actio
Treasure Desek L. Davis		Add Remove
cretary Derek L. Davis		☐ Add Remove
1 m		☐ Add ☐ Remove
E. <u>If amending or adding additional Articles, ente</u>	or change(s) hare:	
(attach additional sheets, if necessary). (Be spec		N. 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10
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<u> </u>		
F. If an amendment provides for an exchange, reprovisions for implementing the amendment in (if not applicable, indicate N/A)		
•		·

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> Address **Type of Action** R. V.P. Glenn Matthew
Treasure Charles Sneed
Secretary Anthony Brown SR. V.P. Add ☐ Remove 3425 Pinewalk Dr. N B Add 17031 N.W. 9th Place WAdd E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendment(s) adoption: 7/10/09		
Effective date if applicable:	(date of adoption is required)	
Elicetive date <u>it appreadic</u> .	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement of 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)	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated	July 19, 2007	
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Typed or printed name of person signing)	
	Title of person signing)	