

## **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone

: (850)521-1000

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## **QE AMND/RESTATE/CORRECT OR O/D RESIGN**

L.U.P.A. NETWORK SERVICES, INC.

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help



Articles of Amendment					
to					
Articles of Incorporation of					
L.U.B. Network SETVICES INC.					
(Name of Corporation as currently filed with the Florida Dept of State)					
P0800000 8521					
(Document Number of Corporation (if known)					
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:					
A. If amending name, enter the new name of the corporation:					
Planterment For all sug					
The new same must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."					
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  CIPCLE South  P. L. L. D. C.					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)					
D. If smending the registered seent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:					
Name of New Registered Agent:					
New Registered Office Address: (Fforidaffings oddress)					
(City) Florida (Zip Code)					
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.					
Signature of New Registered Agent, if changing					

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ren	amending the Officers and/or Directors, enter moved and title, name, and address of each Offitach additional sheets, if necessary)	the title and name o licer and/or Directo	f each officer/director being r being added:
<u>Tît</u>	tle Name	Address	Type of Action
H	Pas DOV LEUMI	Hallandale	olden Isles W Add UNIT JE   Remove
V	I.P. Romane Jurand	15010 Wi South Probate	Shire er.   Add   Remove
Ď	SP Romne Swand	15212 Wilsh	Marake A Remove
	If amending or adding additional Articles, ent (attach additional sheets, if necessary). (Be spe		
a	hange the purpose of	or Which	the corporation is
4	nganized from: Mark	eting	the corporation is
<u>L</u>	o: minueun for	ale Chill	esen
			<del></del>
F.	If an amendment provides for an exchange, reprovisions for implementing the amendment (if not applicable, indicate N/A)	eclassification, or c if not contained in (	ancellation of issued shares, the amendment itself:
_			
			1000
_			
	P	age 2 of 3	

The date of each amendment(s) adoption:
The date of each amendment(s) anophoris
Effective date if applicable: 2/6/8
(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
(nound describ)
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.
Detect 12/20/08
Signature Some
(By a director, president 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)
4;,,
(Typed or printed name of person signing)
Registered agent Sirector (Title of person signing)