## P08000025965

(	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:
Conce	ser doeuners flyhne um 11 /2:1-11

Office Use Only



600214031386

11/08/11-01008-017 \*\*43.75 4 fred 1-1-12 Amend

-11 NOV 21 PH 3: 24
SECRETARY OF STATE
TALLAHASSEE FLORIDA

1121-11



## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 9, 2011

JOHN T. MILLER AM DATA SERVICE, INC. 13927 RIVERSIDE ST LIVONIA, MI 48154

SUBJECT: AM DATA SERVICE, INC.

Ref. Number: P08000025965

We have received your document for AM DATA SERVICE, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 711A00025420

RECEIVED
NOV21 AM 8:32
LANSKEE FLORIDA

www.sunbiz.org

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: AM Da	ta Service, Inc.	<del></del>
DOCUMENT NUMBER: PO80000259	065	<del></del>
The enclosed Articles of Amendment and fe	ee are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
John T Mil	ller	
Nar	me of Contact Person	
AM Data Se	ervice, Inc	
	Firm/ Company	<del></del>
13927 Rive	erside St	
	Address	<del>_</del>
Livonia, Mi		
City	// State and Zip Code	
rich@amdataservice.	com	
E-mail address: (to be	used for future annual report notification)	
For further information concerning this matte	er, please call:	
John Miller	at (734 ) 679-7876	
Name of Contact Person	Area Code & Daytime Telephone	Number
Enclosed is a check for the following amount	t made payable to the Florida Department of	of State:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	Certified Copy Cer (Additional copy is Cer enclosed) (Ad	2.50 Filing Fee rtificate of Status rtified Copy dditional Copy 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	

## Articles of Amendment to Articles of Incorporation of



AM DATA	SERVICES	INC.	
(Name of Corporation as cur	rently filed with th	ıd Florida Dept. of Sta	<u>ate</u> )
P08000025965 (Document Nu	umber of Corporation	on (if known)	<del></del>
Pursuant to the provisions of section 607.10 following amendment(s) to its Articles of Incompared to the provisions of section 607.10 following amendment(s) to its Articles of Incompared to the provisions of section 607.10		es, this <i>Florida Profit</i>	Corporation adopts the
A. If amending name, enter the new name	of the corporation	<u>:</u>	
The new name must be distinguishable "incorporated" or the abbreviation "Corp., "Co". A professional corporation nai association," or the abbreviation "P.A."	" "Inc.," or Co.,	" or the designation '	"Corp," "Inc," or
B. <u>Enter new principal office address, if ar</u> (Principal office address <u>MUST BE A STRE</u>			
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF			NOV 2 PM
	-		STATE STATE
D. If amending the registered agent and/or new registered agent and/or the new registered agent			ter the name of the
Name of New Registered Agent:			_
New Registered Office Address:	(Floria	la street address)	_
		(City)	, Florida (Zip Code)
New Registered Agent's Signature, if chang I hereby accept the appointment as register position.			pt the obligations of the
_	Signature of New I	Registered Agent, if cha	anging

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director. (Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.) Title(s) <u>Name</u> Address 1)\_\_\_\_ 2)\_\_\_\_ 3)\_\_\_\_ 5)\_\_\_ 6)\_\_\_\_ If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed: Title(s) <u>Name</u> Title(s) <u>Name</u> 1)\_\_\_\_

5)\_\_\_\_

6)\_\_\_\_

2)\_\_\_\_

3)\_\_\_\_

·(attach additional sheets, if necessary). (Be specific)					
ncrease authorized s	<del></del>		1.00		
EFFECTIVE	No V 1	0,2011			<u></u>
			·····		
· · · <del>-</del>					
	····			· · · · · · · · · · · · · · · · · · ·	
' If an amandma	nt provides for	on evchange	raclassification	or cancellatio	n of issued shares
provisions for i		he amendmer	, reclassification it if not containe		n of issued shares. Iment itself:
provisions for i	mplementing t	he amendmer			
provisions for i	mplementing t	he amendmer			
provisions for i	mplementing t	he amendmer			
provisions for i	mplementing t	he amendmer			
provisions for i	mplementing t	he amendmer			
provisions for i	mplementing t	he amendmer			
provisions for i	mplementing t	he amendmer			
provisions for i	mplementing t	he amendmer			
provisions for i	mplementing t	he amendmer			

The date of each amendment	(s) adoption: 1/ 104/201
Effective date if applicable:	01/01/2012 (date of adoption - required)
<u></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.
The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following statement d 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/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Signature	a director, president or other officer – if directors or officers have not been
sele	octed, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	Richard L Miller
	(Typed or printed name of person signing)
	President
	(Title of person signing)