# P08000049732

(Requestor's Name)		
(Address)		
(Address)		
(Addiess)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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N.C. **C.COULLIETTE** 

MAY 1 8 2010

**EXAMINER** 

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

`\

NAME OF CORPOR	RATION:	SPINVESTING, INC.	<u></u>
DOCUMENT NUME	BER:	P08000049732	
The enclosed Articles	of Amendment and fee a	re submitted for filing.	
Please return all corres	spondence concerning thi	s matter to the following:	
		HARD LEDERMAN	<del>-</del>
	N	ame of Contact Person	
	RICHA	RD L. LEDERMAN, PA	_
		Firm/ Company	
	4	NW 108TH WAY	-
		Address	
		NTATION, FL 33324 ty/ State and Zip Code	_
		· ·	
,	E-mail address: (to be use	MAN@AOL.COM I for future annual report notification)	
For further information	n concerning this matter,	please call:	
RICHAR	D LEDERMAN	at ( 954 ) 474-1130	
Name of C	Contact Person	Area Code & Daytime Telephone Numb	er
Enclosed is a check for	r the following amount n	ade payable to the Florida Department of Sta	te:
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	(Additional copy is enclosed) Certified	e of Status
Mailing Address Amendment Se Division of Cor P.O. Box 6327	ection rporations	Street Address Amendment Section Division of Corporations Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301



May 5, 2010

RICHARD LEDERMAN 4 NW 108TH WAY PLANTATION, FL 33324

SUBJECT: SPINVESTING, INC. Ref. Number: P08000049732

We have received your document for SPINVESTING, 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

#### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L05000037336/ IMPERIAL ENTERPRISES, LLC.

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) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 710A00011147



### Articles of Amendment to Articles of Incorporation of

SPINVE	ESTING, INC.		
(Name of Corporation as curre	ntly filed with the Florida	Dept. of State)	
P080	000049732		
(Document Num	ber of Corporation (if know	vn)	
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	, Florida Statutes, this <i>Flo</i>	orida Profit Corporation a	dopts the following
A. If amending name, enter the new name of	the corporation:		
A-1 IMPERIAL	ENTERPRISES, INC.		The new
name must be distinguishable and contain t abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "proj	designation "Corp," "Inc,	" or "Co". A professiona	
B. Enter new principal office address, if appl			
(Principal office address <u>MUST BE A STREE</u>	I ADDRESS )		<b>7</b>
			HA SOM
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)			
(maning dauless MAI BE AT OBT OTTE	<u></u>		AM IO: OR
			— e i
D. If amending the registered agent and/or renew registered agent and/or the new registered.		Florida, enter the name of	<u>of the</u>
	torou orrieo waar oor		
Name of New Registered Agent:			
New Registered Office Address:	(Florida street aa	ldress)	
_		, Florida	<u>.                                </u>
	(City)	(Zip Code)	
New Registered Agent's Signature, if changin	g Registered Agent:		
I hereby accept the appointment as registered ag	gent. I am familiar with an	nd accept the obligations of	the position.

Signature of New Registered Agent, 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Add☐ Remove
<del></del>			
(attach ad	ling or adding additional Articles, endeditional sheets, if necessary). (Be sp	ecific)	, 
provisio	nendment provides for an exchange, lons for implementing the amendment of applicable, indicate N/A)		
		. <u>.</u>	

The date of each amendment	(date of adoption is required)
Effective date if applicable:	(date of adoption is required)
	(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 and 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/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 4/	127 /2010
Signature	and fill
(ву	a director, president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court
	ointed fiduciary by that fiduciary)
	DAVID SPINNEY
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)