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Amend, 10.4110

COVER LETTER &

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	ALFRED CASALE IN	С
DOCUMENT NUMBER:		P080052264	
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.	
Please return all co	orrespondence concerning th	is matter to the following:	
	СНІ	RISTINE M CASALE	
	N	lame of Contact Person	
	ALI	FRED CASALE INC	
		Firm/ Company	
4233 SW 23RD AVE			
		Address	
		PE CORAL, FL 33914	
	E-mail address: (to be use	DYMAN@LIVE.COM d for future annual report notification)	
For further inform	ation concerning this matter,	please call:	
ALI	FRED A CASALE		40-0271
Name	e of Contact Person	Area Code & Daytime Tel	lephone Number
Enclosed is a chec	k for the following amount n	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 A		Street Address	
Amendmer		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327 Tallahassee FL 32314		Clifton Building 2661 Executive Center Circl	le .

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

ALFRED CASALE INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P0	80052264	
(Document Nun	nber of Corporation (if know	vn)
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this Flo	orida Profit Corporation adopts the fo
A. If amending name, enter the new name of	f the corporation:	
		The ne
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	designation "Corp," "Inc,	" or "Co". A professional corporation
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		

C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)		
D. If amending the registered agent and/or remains registered agent and/or the new registered.		Florida, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street ad	ddress)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a		nd accept the obligations of the position
	*****	1 1 1 C -1

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
VP	CHRISTINE M CASALE	4233 SW 23RD AVENUE CAPE CORAL, FL 33914	
(anuch un	dditional sheets, if necessary). (Be spe		
	, , , , , , , , , , , , , , , , , , ,		
provisi	nendment provides for an exchange, rons for implementing the amendment not applicable, indicate N/A)		
		·	

The date of each amendment(s)	adoption: 09/27/2010	
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/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statemen for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(1	ooting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated 09/27/	2010	
Signature	Afred a. Casale	
(Ву а	director president or other officer - if directors or officers have not been	
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	
	ALFRED A CASALE	
•	(Typed or printed name of person signing)	
	PRESIDENT	
•	(Title of person signing)	