P08000057270

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Ñan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Amend + N/C

TB 12-9-05

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION:	JOP INTERNATIONA	L INC
DOCUMENT NUMBER:PO80	000057270	
The enclosed Articles of Amendment and fe	ee are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
JAMES O'PRA	me of Contact Person)	— ,
JOP INTERNA	TIONAL INC. (Firm/Company)	
4161 ROYAL	(Address)	
PALM BEACH (City	CALL) ENS F Z 33 y/ State and Zip Code)	40
For further information concerning this matt	ter, please call:	
JEAN O'PRAY (Name of Contact Person)	at (754) 401 - (Area Code & Daytime To	7/99 elephone Number)
Enclosed is a check for the following amour		
\$35 Filing Fee \$\times \text{Certificate of Status}\$	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Address	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 24, 2008

JAMES O'PRAY JOP INTERNATIONAL, INC. 4161 ROYAL OAK DR PALM BEACH GARDENS, FL 33410

SUBJECT: JOP INTERNATIONAL, INC.

Ref. Number: P08000057270

We have received your document for JOP INTERNATIONAL, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

When changing the name of a corporation filed pursuant to chapter 607, Florida Statutes, to that of a professional service corporation filed pursuant to chapter 621, Florida Statutes, the specific business purpose must also be added or changed to indicate what type of professional service the corporation will be rendering.

The date of adoption of each amendment must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

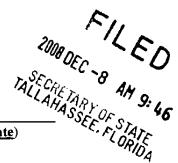
If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 308A00058262

08 DEC -8 AH 8: 00

Articles of Amendment to Articles of Incorporation of



	LLAHASSTOF AM 9: 41
(Name of Corporation as currently filed with the Florida Dept. of State)	- OCE, FLORIE
JOP INTERNATIONAL INC	-M/OA
(Document Number of Corporation (if known)	
	<u> </u>

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

JOP INTERNATIONA	nd contain 'the word "corporation," "company,"	
ncorporated" or the abbreviation "Corp.,"	nd contain the word "corporation," "company," "Inc.," or Co.," or the designation "Corp," "Inc," e must contain the word "chartered," "profession	or
Enter new principal office address, if app		
rincipal office address <u>MUST BE A STREE</u>	T ADDRESS)	
		_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE		
-		·
	 	
	registered office address in Florida, enter the name of	the
new registered agent and/or the new regis		the
		the
new registered agent and/or the new regis		the
new registered agent and/or the new regis	stered office address: (Florida street address)	
new registered agent and/or the new registered Agent:	stered office address:	
Name of New Registered Agent: New Registered Office Address:	(Florida street address) , Florida (City) , (Zip Code)	
new registered agent and/or the new registered Agent: Name of New Registered Agent: New Registered Office Address: ew Registered Agent's Signature, if changing	(Florida street address) , Florida (City) , (Zip Code)	
new registered agent and/or the new registered Agent: Name of New Registered Agent: New Registered Office Address: Ew Registered Agent's Signature, if changing thereby accept the appointment as registered.	(Florida street address) (City) (Zip Code)	

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>	Name	Address	Type of Action
			Add Remove
		· · · · · · · · · · · · · · · · · · ·	LI Remove
			Add Remove
	additional sheets, if necessary). (B	- Tai poc	
<u>provi</u>	amendment provides for an exchansions for implementing the amendment of th	ge, reclassification, or cancelle ent if not contained in the am	ation of issued shares, lendment itself:

The date of each amendment	(s) adoption: 11/17/266 8
Effective date if applicable:	,
**************************************	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e 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 of	east for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	e adopted by the board of directors without shareholder action and shareholder e adopted by the incorporators without shareholder action and shareholder
Dated//_	117/2008
selec	a director, president or other officer—if directors or officers have not been cted, by an incorporator—if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)