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SECRETARY OF STAR

nc News 3-25-11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION:	Affordable Accounting & Bookkeeping, Inc.	
. DOCUMENT NU	MBER:	P08000057881	
The enclosed Artic	cles of Amendment ar	and fee are submitted for filing.	
Please return all co	orrespondence concer	rning this matter to the following:	
		Lisa Burke	
		Name of Contact Person	
		Firm/ Company	
		4312 4th Avenue N.E.	
		Address	
1.30° y - 1.32 12° y - 1.02° y		Bradenton, FL 34208	
Land Comme		City/ State and Zip Code	
	braden E-mail address: ((ntonbookkeepers@verizon.net (to be used for future annual report notification)	
For further informa	ation concerning this	matter, please call:	
	Lisa Burke	at (941) 705-0203 Area Code & Daytime Telephone Number	
Name	of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check	k for the following an	mount made payable to the Florida Department of State:	
\$35 Filing Fee	\$43.75 Filing Fee Certificate of State		
P.O. Box 63	t Section Corporations	Street Address Amendment SectionDivision of CorporationsClifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

Articles of Amendment Articles of Incorporation of

	Articles of Amendment to articles of Incorporation of	C. TASECRITARY OF STATE TALLAHASSE FLORITA
	ting & Bookkeeping, Inc	C
(Name of Corporation as curre	ntly filed with the Florida Dept	t. of State
	000057881	- SESESTAN
(Document Num	ber of Corporation (if known)	LORIDA
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	, Florida Statutes, this <i>Florida</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of	the corporation:	
Bradenton	Bookkeepers, Inc.	The new
B. Enter new principal office address, if appl (Principal office address MUST BE A STREET) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or registered agent.	icable: FADDRESS) EBOX egistered office address in Florid	
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	•
-	(City)	(Zin Code)
New Registered Office Address: New Registered Agent's Signature, if changing thereby accept the appointment as registered ag	(City) g Registered Agent:	, Florida (Zip Code)
Si_2	gnature of New Registered Agent,	nt, 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>	<u>Address</u>	Type of Action
,			Remove
•		· · · · · · · · · · · · · · · · · · ·	☐ Add
			
E. If amendin	g or adding additional Articles tional sheets, if necessary). (Bo	enter change(s) here:	
	(Di	- specificy	
-			
<u> </u>			
	<u> </u>		
		<u>,</u>	
F. If an amer	ndment provides for an exchange	ge, reclassification, or cancella	tion of issued shares,
(if not a	for implementing the amendmapplicable, indicate N/A)	ient ii not contamed in the ame	nament itsen:
***		10	
···			

	t(s) adoption: 2/3///
Effective date if applicable:	(dale of adoption is required)
Effective date il applicable;	(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	are adopted by the shareholders. The number of votes cast for the amendmenter sufficient for approval.
	are approved by the shareholders through voting groups. The following stated 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)
action was not required. The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	3/22/11
Signature	LisaBurke
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other concinted fiduciary by that fiduciary)
арр	ointed fiduciary by that fiduciary)
	Lisa Burke
	(Typed or printed name of person signing)
	(Typed or printed name of person signing) President