# P08000060755

|                      | (Requestor's Name)       |
|----------------------|--------------------------|
|                      | (Address)                |
|                      | (Address)                |
|                      | (City/State/Zip/Phone #) |
| PICK-U               | P WAIT MAIL              |
|                      | (Business Entity Name)   |
|                      | (Document Number)        |
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| Special Instructions | s to Filing Officer:     |
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10 OCT 25 AM IO: 21
SECRETARY OF STATE
TALLAHASSEE, FLORID

# Roberts (OCT 2 8 2010)

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

| NAME OF CORE  | PORATION:                                  | ANIMOD, INC.   |   |
|---|--|--|---|
| DOCUMENT NU   | MBER:                                      | P08000060755   | ,<br>   |
| The enclosed Artic                                  | les of Amendment and fee a                 | re submitted for filing.   |   |
| Please return all co                                | orrespondence concerning thi               | s matter to the following:   |   |
|   | *** ********************************       | LIVER HUTTNER  |   |
|   | N  | ame of Contact Person  |   |
|   | MANAGEME                                   | NT TAX CONSULTING, INC.  |   |
|   |  | Firm/ Company  |   |
|   | 12   | 21 SW 10TH TER   |   |
|   |  | Address  |   |
|   |  | E CORAL, FL 33991  | ····  |
|   |  | ity/ State and Zip Code  |   |
| •   | mtc.flo<br>E-mail address: (to be use      | rida@gmail.com<br>d for future annual report notification)                 |   |
| For further informa                                 | ation concerning this matter,              | please call:   |   |
|   | IVER HUTTNER                               | at ( ,   | 297-3348  |
|   | of Contact Person                          | Area Code & Daytime To   | •   |
| Enclosed is a check                                 | k for the following amount n               | nade payable to the Florida Depa   | rtment 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 Ac<br>Amendmen<br>Division of<br>P.O. Box 6 | t Section<br>Corporations                  | Street Address Amendment Section Division of Corporations Clifton Building |   |

2661 Executive Center Circle

Tallahassee, FL 32301

#### **Articles of Amendment**

to

#### **Articles of Incorporation**

of

| FI                           | LED      |
|------------------------------|----------|
| 10 OCT 25                    |          |
| t. of State).                | AM 10:21 |
| t. of State).<br>TALLAHASSEE | FLORIDA  |

## ANIMOD, INC.

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

### P08000060755

(Document Number of Corporation (if known)

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

| name must be distinguishable and contain th<br>abbreviation "Corp.," "Inc.," or Co.," or the a<br>name must contain the word "chartered," "profe | designation "Corp," "Inc," or | "Co". A professional corporation |
|--|-------------------------------|----------------------------------|
| B. Enter new principal office address, if appli<br>(Principal office address MUST BE A STREET  |                               |                                  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC  | <u></u><br>( <u>E BOX</u> )   |                                  |
|  |                               |                                  |
| D. If amending the registered agent and/or re<br>new registered agent and/or the new regist  |                               | rida, enter the name of the      |
| D. If amending the registered agent and/or renew registered agent and/or the new registered agent:  Name of New Registered Agent:                |                               | rida, enter the name of the      |
| new registered agent and/or the new regist   |                               |                                  |

# . 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) Title <u>Name</u> Address **Type of Action** D HIELSCHER, IRA 1221 SW 10TH TER ☑ Add CAPE CORAL, FL 33991 ☐ Remove ☐ Add ☐ Remove \_\_\_\_\_ 🔲 Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

| The date of each amendment                        | t(s) adoption: 08/20/2010  |
|---|--|
|   | (date of adoption is required)   |
| Effective date <u>if applicable</u> :             | (no more than 90 days after amendment file date)   |
| Adoption of Amendment(s)                          | (CHECK ONE)  |
|   | ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.  |
|   | ere approved by the shareholders through voting groups. The following statement ed 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)   |
|   | (voting group)   |
| action was not required.  The amendment(s) was/we | ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder |
| action was not required.                          |  |
| Dated   | 8/20/2010 Hasale Hasale  |
| Signature   | y a director, president or other officer – if directors or officers have not been  |
| sel   | ected, by an incorporator – if in the hands of a receiver, trustee, or other court   |
|   | pointed fiduciary by that fiduciary)   |
|   | HARALD HIELSCHER   |
|   | (Typed or printed name of person signing)  |
|   | PRESIDENT  |
|   | (Title of person signing)  |
|   | (1100 or person signing)   |