P08000067481

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SECRETARY OF STATE OF STATE

ル.C. C.COULLIETTE

APR 2 9 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Amazing Staging In	IC
DOCUMENT NUMBER: P080000	Name of Corporation) 067481
The enclosed Articles of Correction and for	
Please return all correspondence concerni	ng this matter to the following:
Mary Jo Rushing (Name of Contact Person)	
Amazing Staging Inc	
12929 Pennel Pines Rd	
Boynton Beach, FI 33436 (City/State and Zip Code)	
For further information concerning this m	atter, please call:
Mary Jo Rushing	at (C/54) 444-5700 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amo	ount:
	\$43.75 Filing Fee & Certificate of Status
\$43.75 Filing Fee & Certified Copy	\$52.50 Filing Fee, Certificate of Status & Certified Copy
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 30, 2009

MARY JO RUSHING AMAZING STAGING INC 12929 PENNEL PINES RD BOYNTON BEACH, FL 33436

SUBJECT: AMAZING STAGING INC

Ref. Number: P08000067481

We have received your document for AMAZING STAGING 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):

Articles of Correction must be filed within 30 days of the date that the original document was filed.

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: 709A00010519

RECEIVED
009 APR 28 AM 8: 00

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Amazing S	Staging Inc	N
DOCUMENT NUMBER: P08000067	7481	d
The enclosed Articles of Amendment and fee a	are submitted for filing.	
Please return all correspondence concerning th	is matter to the following:	
	tary Jo Rushing of Contact Person)	_
Ama	zing Home Staging Inc	
	m/ Company)	
	9 Pennel Pines Rd	
	(Address)	
	on Beach, Fl 33436	
For further information concerning this matter,	tate and Zip Code) please call:	
	at (<u>954</u>) <u>444-5900</u>	
(Name of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for the following amount m	ade payable to the Florida Dep	artment of State:
\$35 Filing Fee \$\ \tag{\$43.75 Filing Fee & Cortificate of Status}	\$43.75 Filing Fce & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassec, FL 32301	rele

Articles of Amendment to Articles of Incorporation of

Amazing Staging Inc	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P08000067481 (Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
Amazing Home Staging Inc	
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	12 SE
(Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ION OF CORPORATIONS
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent:	
New Registered Office Address: (Florida street address)	
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Signature of New Registered Agent, if changing	

The date of each amendment(s) adoption:		
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 of 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)	
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated		
selec	a director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustec, or other court inted fiduciary by that fiduciary)	
	Mary 30 Rushing	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	