P08000067961

(Requestor's Name)
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(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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01/05/09--01046--007 **43.75

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09 JAN 27 PM 4: 00

T. Roberts INN 211



January 12, 2009

RASHEEM O' RILEY TRUE IMAGE RECORDS 1826 SW 29TH STREET FORT LAUDERDALE, FL 33315

SUBJECT: TRUE IMAGE RECORDS INC.

Ref. Number: P08000067961

We have received your document for TRUE IMAGE RECORDS INC. and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears that you completed the wrong form.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6892.

Tina Roberts Regulatory Specialist II

Letter Number: 409A00000911

SECRETARY OF STATE TALL AHASSEE, FLORIOA

00:8 MA TS NAL 800S

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

1		•	
NAME OF CORPORATION:	ve	Image	Records
DOCUMENT NUMBER: P008	0000	67961	
The enclosed Articles of Amendment and fee	e are submi	tted for filing.	
Please return all correspondence concerning t	this matter	to the following:	
RASher	em ne of Contact	D' Rile	
True In	1ag Compa	Record	ls inc.
1826 SW	29F (Address)	n Street	<u> </u>
Ff. Landerchale (City)	Flori	<u>da</u> 333	515
For further information concerning this matte	er, please c	all:	
Rasheem O'Liley (Name of Contact Person)	at	(754) <u>43</u> (Area Code & Dayt	3 - 3365 ime Telephone Number)
Enclosed is a check for the following amount	t made pay	able to the Florida I	Department of State:
\$35 Filing Fee \$\times \$43.75 Filing Fee \$\times \$\text{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 Address Amendment Section Division of Corporations P.O. Box 6327	An Div	cet Address nendment Section rision of Corporatio fton Building	ns

2661 Executive Center Circle

Tallahassee, FL 32301

FILED

Articles of Amendment to Articles of Incorporation of

09 JAN 27 PM 4:00

OI	FLORIDA
True Image Re	econds Inc.
(Name of Corporation as currently filed with	the Florida Dept. of State)
P0080006796	
(Document Number of Corpora	tion (if known)
Pursuant to the provisions of section 607.1006, Florida Statufollowing amendment(s) to its Articles of Incorporation:	ates, this Florida Profit Corporation adopts the
A. If amending name, enter the new name of the corporation	<u>on:</u>
N/A	•
The new name must be distinguishable and contain the "incorporated" or the abbreviation "Corp.," "Inc.," or Co". A professional corporation name must contain association," or the abbreviation "P.A."	o.," or the designation "Corp," "Inc," or
B. Enter new principal office address, if applicable:	1826 SW 29th street
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Fort Lauderdale 1-1A
	33315
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1826 SW 29th Street
	Fort Lauderdale FlA
	33315
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent: Crage	McKenzie
New Registered Office Address: (Flor	SW 29th Street rida street address)
Fort L	auderdale , Florida 33315 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered A lambda	Agent: familiar with and accept the obligations of the
a true out accept the experimental our regulation excelled a Mill	- particular transfer of the property of the contract of the c

Nev I he position.

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	
νp	FLIJAH	T. M∞re, 3	R 1224 FORT LA	SW 9. Volendate 333	HAVE FLA 15	Add Remove	
<u> </u>	Richard DE	LA PAZ	349 Ea Fort Laux	st Dayti derdale,	ona Circ Glorida 312	Add Remove	
<u>m</u> GR	Crage Mcl	(enzi-c	785 k	Mirkly 1 0 Geory 3021	by gra	Add Remove	
	ding or adding addition dditional sheets, if neces			<u>'e</u> :			
The	c owner	and '	Presiden	1 + 1.	\$	Rasheem	O'Riley
				•	<u></u>		
provisio	nendment provides for ons for implementing to not applicable, indicate i	<u>he amendment if</u>					
	shares of					~	
disbur	rsed as	shand	, bet	veen	Rid	nard DE	
LA PA	z and	GLIJ	AH T.	moore	JR.		
QII	Shares O	ne ou	ned	by	Ras	heem	
O'Rile	· · · · · · · · · · · · · · · · · · ·	n.	70 2 0E 3				
	•	Pay	ge 2 of 3				

' ' '	
The	e date of each amendment(s) adoption:
Eff	ective date if applicable: (no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Ad	option of Amendment(s) (CHEĆK ONE)
	The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
	The amendment(s) was/were approved by the shareholders through voting groups. The following statemen must be separately provided 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)
	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
	Dated 1 15 09
	Signature Raskey Olilee (By a director, president or other officer of directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)