## P080000009052

(Re	equestor's Name)	····
(Ad	dress)	
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(Ci	ty/State/Zip/Phone	e #)
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## **COVER LETTER**

TO:	Amendment Section Division of Corporations				
NAM	ME OF CORPORATION: TOYZ4ALL INC .		·		
DOC	CUMENT NUMBER: <u>P08000069052</u>				
The e	enclosed Articles of Amendment and fee are	submitted for filing.			
Pleas	se return all correspondence concerning this ma	atter to the following:			
	SUSAN HAZZARD				
		Name of Contact Person			
	TOYZ4ALL INC		•		
		Firm/ Company			
	3190 WINDWARD LANE				
		Address			
	LANTANA, FL 33462				
		City/ State and Zip Code			
	SHAZZARD48@COMCAST.NET	1	, ,		
		to be used for future annual report	notification)		
For fu	urther information concerning this matter, please	e call:			
SUSA	AN HAZZARD	at (407) 474-1655	561-433-9628		
	Name of Contact Person		Daytime Telephone Number		
Enclo	osed is a check for the following amount made p	ayable to the Florida Department o	of State:		
X \$3	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 Address	Street A			
	Amendment Section	Amendment Section			
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building			
,	. Tallahassee, FL 32314		ecutive Center Circle		
•			see, FL 32301		

## Articles of Amendment to Articles of Incorporation of

TOYZ4ALL INC			
(Name of Corporation as currently filed with	the Florida Dept. of State)		.—
P08000069052			
(Document Number of Corporati	ion (if known)		_
Pursuant to the provisions of section 607.1006, Florida Statutes, this Famendment(s) to its Articles of Incorporation:	Florida Profit Corporation adopts the	following	
A. If amending name, enter the new name of the corporation:			
MS ENTERPRISES INC			
The new name must be distinguishable and contain the word "corporate abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or contain the word "chartered," "professional association," or the abbrevia	r "Co". A professional corporation nar		<b></b>
B. Enter new principal office address, if applicable:			_
(Principal office address MUST BE A STREET ADDRESS)			
			_
			_0
	•	12	No.
C. Enter new mailing address, if applicable: (Mailing address MAY.BE.A.POST.OFFICE.BOX)			- <u>9</u> 2
(maining address MATINE A POST OFFICE BOX)		ω	유물건
		- 0	_6 <u>5</u> 5
		- 3	_공유 <sup>C</sup>
D. If amending the registered agent and/or registered office addre	ess in Florida, enter the name of the	့ တဲ့	RES.
new registered agent and/or the new registered office address	u ·	61	₫ <sup>R</sup>
Name of New Registered Agent:			¢.m
(Florida s	strect address)		
	,		
New Registered Office Address: (City)	, Florida	Zip Code)	
(City)	(4	zip Code)	
New Registered Agent's Signature, if changing Registered Agent:			
hereby accept the appointment as registered agent. I am familiar with	and accept the obligations of the posit	ion.	
Signature of New Deviatored 4	goat if changing		

## **TOYZ4ALL INC**

ATX1

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)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: _X Change _X Remove	PI V	John Doe Mike Jones		
_X Add	SV	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	·	Address.
1) Change Add Remove		<del>-</del> . <del></del>	· · · · · · · · · · · · · · · · · · ·	
Change Add Remove		<del>.</del> , <del></del>		
Change Add Remove				
Change Add Remove	<del></del>		<del> </del>	
Change Add Remove		·		· · · · · · · · · · · · · · · · · · ·
Change Add Remove				

TC - <b>If amending c</b> (attach addition	DYZ4ALL INC Dr. adding add	litional Art	icles, enter	change(s	) here:				AT
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f an amendme provisions for (if not applic	nt provides i implementin able, indicate	ig the ame	ange, recla	assificatio ot contair	n, or cance ned in the a	llation of is mendment	sued shares itself:	š,	
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					. —				

The date of each amendment(s) adoption:	4/23/2012				
Effective date if applicable:	4/23/2012				
· · · · · · · · · · · · · · · · · · ·	(no more than 90 days after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)				
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) for approval.				
	by the shareholders through voting groups. The following statement oling 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 b action was not required.	y the board of directors without shareholder action and shareholder				
The amendment(s) was/were adopted b action was not required.	y the incorporators without shareholder action and shareholder				
Dated	4/23/2012				
Signature	an Alybrid				
∕By a direct	or, president or other officer - if directors or officers have not been				
selected, by	y an incorporator —If in the hands of a receiver, trustee, or other court				
appointed fi	iduciary by that fiduciary)				
CLICAN	LIATTADO				
SUSAIN	HAZZARD (Typed or printed name of person signing)				
DDEED					
PRESID	(Title of person signing)				