## P0800070683

	-	
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(9)	(0) 177 (0)	
(Cit	y/State/Zip/Phone	₽#)
PICK-UP	WAIT	MAIL
_	_	· · · · · · · · · · · · · · · · · · ·
(Bu	siness Entity.Nar	ne)
,	·	•
(Do	cument Number)	· · ·
Certified Copies	_ Certificates	of Status
		•
Special Instructions to	Filing Officer:	
·		
	Office Use On	lv
/	0.1100 030 011	''J



300161444273

10/15/09--01009--019 \*\*35.00

र एक मध्यम्ब के स्ट्रिकेट हैं। अपन

reacte of the signed and

ECRETARY OF STATE LLAHASSEE, FLORID

FILED



## **COVER LETTER**

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION: All N	ATIVE CONTRACTINE	
DOCUMENT NUMBER: 40 8000	70683	
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
EUN S Name	Show e of Contact Person	<del></del>
All NATIVE	Company WC	<u> </u>
720 NE 2	Address Aux # 34	
Cape Co	REAL FL 3390 State and Zip Code	9
BUBBAN bowle E-mail address: (to be used to	ds <u>Comment</u> , Not or future annual report notification)	<u> </u>
For further information concerning this matter, ple	ease call:	
Name of Contact Person	at ( <u>339</u> ) <u>170</u> & Area Code & Daytime Tele	239 phone Number
Enclosed is a check for the following amount made	e payable to the Florida Depart	ment of State:
\$35 Filing Fee \$\( \sum \text{S43.75 Filing Fee & Certificate of Status} \)	\$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 Amendment Section	Street Address Amendment Section	
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division of Corporations Clifton Building 2661 Executive Center Circle	•

Tallahassee, FL 32301

## **Articles of Amendment**

to

Articles	of	Incor	poration
----------	----	-------	----------

TASECON STATE OF STAT (Document Number of Corporation (if known)

wing

		The
ame must be distinguishable and contain bbreviation "Corp.," "Inc.," or Co.," or the ame must contain the word "chartered," "pro	e designation "Corp," "Inc,	" or "Co". A professional corpora
Enter new principal office address, if apprincipal office address <u>MUST BE A STREE</u>		
. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI		
	CE BOX)	Florida, enter the name of the
(Mailing address MAY BE A POST OFF)  If amending the registered agent and/or	CE BOX)	Florida, enter the name of the
(Mailing address MAY BE A POST OFF)  If amending the registered agent and/or new registered agent and/or the new reg	CE BOX)	
(Mailing address MAY BE A POST OFF)  If amending the registered agent and/or new registered agent and/or the new registered Agent:	registered office address in istered office address:	

## 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>	Name	Address	Type of Action
41005	Amarda Ruppor	Cape Corn	Add Remove
Pres	REYNOOD BERTI	220 NE 35 Cape Corne	France St Add Remove
			☐ Add☐ Remove
	additional sheets, if necessary). (Be		
provis	mendment provides for an exchange to the second menting the amendment applicable, indicate N/A)		
_Ar	Lox Berti	60°10	
Rec	WOLD Barts	20%	
<u> Feni</u>	N Show	2090	
	•		

The date of each amendment(s) ad	option: 10(12-109
	(date of adoption is required)
Effective date <u>if applicable</u> : (no i	nore than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for	or the amendment(s) was/were sufficient for approval
by All NATIVE (voti	CONTRACTING INC."
The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder
Dated/0 /	12/09
selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court if fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)