## P08000014536

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SECRETARY OF STATE TALLAHASSEE, FI ORIGINA

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** Three Mac Inc. NAME OF CORPORATION: P08000074536 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: William Mchemore
Name of Contact Person 3205 Fox Chase Circle N #102 Palm Harbor, FL 34683
City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: William McLemore at (727) 781–1030

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Mailing Address** Street Address

Amendment Section

Clifton Building

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

**Amendment Section** 

P.O. Box 6327

**Division of Corporations** 

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation of

FIL	.ED
2009 SEP -1.	_
JALLAHASSEE,	FSTATE FLORIDA

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

P08000074534

(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:

oration," "company," or "incorporated" or the orp," "Inc." or "Co". A professional corporation tion," or the abbreviation "P.A."
N/A
NA
address in Florida, enter the name of the
V/A
da street address)
, Florida (Zip Code)
gent: liar with and accept the obligations of the position
Registered Agent, if changing
1

## 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
VP	Mary C. McLemore	- 3205 Fox Chose Cirn # 102 Palm Harbor FL	Add Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
	g or adding additional Articles, enter clional sheets, if necessary). (Be specific		
F. If an amen	dment provides for an exchange, recla	ssification, or cancellation of iss	ued shares.
provisions	for implementing the amendment if no applicable, indicate N/A)		tself:
		·	

The date of each amendment(s) adoption: 9-1-09
(date of adoption is required)
Effective date <u>if applicable</u> : $9-1-09$ (no more than 90 days after amendment file date)
(
Adoption of Amendment(s) (CHECK 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 statement 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"
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.
J <sub>Dated</sub> 9.1.09
Signature William J. Helenso h.
(By a director, president or other officer – if 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)
William S. McLembre JR.  (Typed or printed name of person signing)
PRESIDENT (Title of person signing)