## P08000075137

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2010 MAY 24 PH 12: 29
SECRETARY OF STATE

Amend

TB

MAY 24 2010

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: AD-E-MOTION CORP				
DOCUMENT NUMBER: P08000075137				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
IRA RAPPAPORT  Name of Contact Person				
AD-E-MOTION CORP Firm/Company				
6627 COBIA CIRCLE				
BOYNTON BEACH, FL 33437 City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
TRA RAPPAPORT at (56/) 699-6/66  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 \$\bigcup \\$43.75 Filing Fee \& Certificate of Status \$\bigcup \\$Additional copy is enclosed\$\\ \bigcup \\$35 Filing Fee \& Certificate of Status \\ \bigcup \\$43.75 Filing Fee \& Certificate of Status \\ \bigcup \\$Additional copy is enclosed\\ \bigcup \\$43.75 Filing Fee \& Certificate of Status \\ \bigcup \\$Additional Copy is enclosed\\ \bigcup \\$43.75 Filing Fee \& Certificate of Status \\ \bigcup \\$43.75 Filing Fee \& Certificate of Status \\ \bigcup \\$43.75 Filing Fee \& Certificate of Status \\ \bigcup \\$43.75 Filing Fee \& Certificate of Status \\ \bigcup \\$43.75 Filing Fee \& Certificate of Status \\ \bigcup \\$43.75 Filing Fee \& Certificate of Status \\ \bigcup \\$43.75 Filing Fee \& Certificate of Status \\ \bigcup \\$43.75 Filing Fee \& Certificate of Status \\ \bigcup \\$43.75 Filing Fee \& Certificate of Status \\ \bigcup \\$43.75 Filing Fee \& Certificate of Status \\ \bigcup \\$43.75 Filing Fee \& Certificate of Status \\ \bigcup \\$43.75 Filing Fee \& Certificate of Status \\ \bigcup \\$43.75 Filing Fee \& Certificate of Status \\ \bigcup \\$43.75 Filing Fee \& Certificate \\ \bigcup \\$43.75 Filing Fee \\ \bigcup \\$43.75 Fil				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle				

Tallahassee, FL 32301

## Articles of Amendment

to

· Articles of Inco	orporation 🖍,
of	20/0. L.A.
AD-E-MOTION COR	P
(Name of Corporation as currently filed with	the Florida Dept. of State)
P080000751	the Florida Dept. of State)  ALEGRAPA  ALEGRAPA  AND SEE OF STATE  TO STATE OF STATE
(Document Number of Corporati	on (if known)
Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation:  A. If amending name, enter the new name of the corporation	es, this Florida Profit Corporation adopts the following
name must be distinguishable and contain the word "corp	The new oration." "company." or "incorporated" or the
abbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associations associated to the contain the word "chartered," "professional associated to the contain the contai	orp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	IRA RAPPAPORT
	6627 COBIA CIRCLE
	BOYNTON BEACH, FL 33437
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	

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:

IRA RAPPAPORT

New Registered Office Address:

6627 COBIA CIRCLE
(Florida street address)

BOYNTON BEACH, Florida 33437
(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

## 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)

Title	Name	Address	Type of Action
	TRA RAPPAPORT	6627 COBIA CIRCO BOYNTON BEACH, 1 33437	∠□ Add ∠□ Remove
. FORMEN. PRESIDENT	ELLEN RAPPAPORT	6627 COBIA CINO BOYNTON BEACH FL 3343;	∠ Add - Add Z
			_
provision	ndment provides for an exchange, recl s for implementing the amendment if n applicable, indicate N/A)		

The date of each amendment(s) adoption: 5/10/20/0
Effective date if applicable: 5/10/20/0 (date of adoption is required)  (no more than 90 days after amendment file date)
(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"
(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 5/10/2010 Signature Act Farm Signature
Signature For Form
(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)
IRA RAPPAPORT
(Typed or printed name of person signing)
PRESIDENT (Title of person signing)