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SECRETARY OF STATE
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COVER LETTER

				•	
TO:	Registration Sect Division of Corpo	orations			
SUBJI	CCT:	New Day Name of Limi	Management	INC.	
		Name of Limi	ted Liability Company		
The en	closed Articles of Ar	mendment and fee(s) are sub	omitted for filing.		
Please	return all correspond	dence concerning this matter	to the following:		
		Jamee	McClipe Name of Person	(President)	-
			Firm/Company		-
		129 SE	Address		_
			Address		
		Delvay Be Patsyklem E-mail address: (t	ach, FC 3.	3483	
		N de delan	City/State and Zip Code		
		E-mail address: (t	o be used for future annual rep	ort notification)	
For fur		cerning this matter, please ca			
	Jameel Name of P	Mccline	at (561) 37	10- 8238 Daytime Telephone Numbe	r
Enclose	ed is a check for the	following amount:			
\$25	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e.	nclosed) Certified	ite of Status &

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 1, 2010

JAMEEL MCCLINE 129 SE 7TH AVE DELRAY BEACH, FL 33483

SUBJECT: NEW DAY MANAGEMENT, INC.

Ref. Number: P08000076531

We have received your document for NEW DAY MANAGEMENT, INC. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$13.75 is due.

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If yoù have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson Document Specialist Supervisor

Letter Number: 510A00004947

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: $_{\underline{}}$	Day Massegement,	luc.
DOCUMENT NUMBER:PO800	000 76531	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
James	McCline	
	of Contact Person	
F	irm/ Company	
	7th Ave Address	
,	Address	
Delray	Beach, to 33483	
City	State and Zip Code	
E-mail address: (to be used for	r future annual report notification)	
For further information concerning this matter, ple		
Name of Contact Person	at (\$6.1)3+0 Area Code & Daytime Tele	8238
Enclosed is a check for the following amount made	•	
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	S43.75 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	Street Address Amendment Section Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

* · •		F 5 10
Articles of A	mendment	蓝
Articles of Inc	ornoration	超光
of	or por action	SSR 5
	1 .	EFO B
New Day Manag (Name of Corporation as currently filed with		جد جار جار کار کار کار
	the Florida Dept. of State)	A CO
PO 80000-7653 ((Document Number of Corpora	tion (if known)	7
(Document Number of Corpora	non (n known)	
Pursuant to the provisions of section 607.1006, Florida Statu amendment(s) to its Articles of Incorporation:	ites, this Florida Profit Corporation	n adopts the following
A. If amending name, enter the new name of the corporati	on:	
NLA		The new
name must be distinguishable and contain the word "cor abbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional assoc	Corp," "Inc," or "Co". A profession	porated" or the onal corporation
B. Enter new principal office address, if applicable:	Jamed McCline	
(Principal office address MUST BE A STREET ADDRESS)	129 SE 7th Ave	, ,
	1	
	Delray Beach, FL 3	3483
C. Enter new mailing address, if applicable:	•	
(Mailing address MAY BE A POST OFFICE BOX)	Jameel McCline	
	129 SE 7th Are	2./02
•	Delray Bolach, FL 3	37 <u>2</u>
D. If amending the registered agent and/or registered office		ne of the
new registered agent and/or the new registered office ac	ldress:	
Name of New Registered Agent:		
New Registered Office Address: (Flo	rida street address)	
· · · · · · · · · · · · · · · · · · ·	*	
(City	, Florida_) (Zip Code)	<u>.</u>
(City	(Elp Code)	
New Registered Agent's Signature, if changing Registered		- Adam madel -
I hereby accept the appointment as registered agent. I am fan	illiar wiin ana accept the obligations	oj ine position.
Signature of New	v 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	<u>Address</u>	Type of Action
<u> </u>	Patricia Klem	129 SE 7th Ave. Delvay Boarly, FL 33	783 ☐ Add ☐ Remove
		F.	
(attach addi	g or adding additional Articles, enterional sheets, if necessary). (Be spenged by Bus; Ness As (De Cape	cific)	· · · · · · · · · · · · · · · · · · ·
provision:	ndment provides for an exchange, resident of the same	eclassification, or cancellation of the second of the seco	of issued shares, ent itself:
	<u> </u>		

The date of each amendment	(s) adoption:
Effective date if applicable:	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	east for the amendment(s) was/were sufficient for approval
by	(voting group)
•	(voting group)
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated	3/10/10.
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	Tamed McCline (Typed or printed name of person signing)
,	(Typed or printed name of person signing)
	President
	(Title of person signing)