## P08000071535

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Amend

SECRETARY OF STATE DIVISION OF CORPORATIONS

## **COVER LETTER**

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**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: 6/ass F	nancial Serves Inc
DOCUMENT NUMBER: POGOOC	78535
The enclosed Articles of Amendment and fee are s	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
Elliot S. 6/ass	
Fliot S. 6/ass (Name of Co	ontact Person)
Glass Financial Se	ervices Inc.
P. a. Box 770842	
Coral Springs, FL 33	
For further information concerning this matter, plea	
Elliot 6/485 (Name of Contact Person)	at (954) 394-1172 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida Department of State:
\$35 Filing Fee \$\frac{1}{2}\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

09 FEB 27 AM 10: 02

GLASS TINANCIAL SERVICES INC						
(Name of Corporation as curre	ntly filed with t	he Florida Dept. of State)				
P08000078535	•					
(Document Number of Corporation (if known)						
Pursuant to the provisions of section 607.1006 following amendment(s) to its Articles of Incorp	oration:		poration adopts the			
A. If amending name, enter the new name of	the corporation	<u>1:</u>				
The new name must be distinguishable ar "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name association," or the abbreviation "P.A."	"Inc.," or Co.,	" or the designation "Corp	," "Inc," or			
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	2863 W. BrowAR	is BUS				
	Ft. Landerdale, F	L 33312				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	CE BOX)	P.D. Box 77084 Coral Springs, FL	(2 2 330 <b>77</b>			
D. If amending the registered agent and/or renew registered agent and/or the new registered agent.  Name of New Registered Agent:			e name of the			
New Registered Office Address:	(Florid	da street address)				
-			orida			
New Registered Agent's Signature, if changin I hereby accept the appointment as registered position.		<u>gent:</u>	(Zip Code) obligations of the			
Si	gnature of New	Registered Agent, if changing	<del></del>			

## 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 Type of Action** <u>Name</u> Address \_\_ 🗖 Add ☐ Remove \_\_\_\_\_ Add ☐ Remove \_\_\_\_\_ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

Th	he date of each amendment(s) a	doption:	2-24- <u>09</u>	
Eff	ffective date <u>if applicable</u> : <u></u>	2/21/08 El	,	
	(no	more than 90 days after a	amendment file date)	
Ad	doption of Amendment(s)	(CHECK ONE)	)	
	The amendment(s) was/were ad by the shareholders was/were s		rs. The number of votes cast for the amendment(	s)
			ers through voting groups. The following statemed led to vote separately on the amendment(s):	ent
	"The number of votes cast	for the amendment(s) was	as/were sufficient for approval	
	by	ting group)	"	
	(vot	ting group)		
	The amendment(s) was/were ad action was not required.	lopted by the board of dire	rectors without shareholder action and shareholde	er
Z	The amendment(s) was/were ad action was not required.	lopted by the incorporators	rs without shareholder action and shareholder	
	Dated 2/	24/09 Marz		
	Signature <u> </u>	Plante	officer – if directors or officers have not been	
	selected	rector, president or other o , by an incorporator – if in ed fiduciary by that fiducia	in the hands of a receiver, trustee, or other court	
	E	Mot S. Glass	ed name of person signing)	
		(Typed or printed	ed name of person signing)	
	_1	President	person signing)	
		(Title of pe	person signing)	