# P08000080304

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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2011 MAY 18 AM 10: 00
SECRETARY OF STATE
TALLAHASSEF, FI ORIOA

Amend & N/c

Mrown =

## **COVER LETTER**

TO: Amendment • Division of O	Section - Corporations		21.* ·
NAME OF COR	PORATION:/	M. Stein I	-uc.
DOCUMENT N	UMBER: POS	0000803	04
The enclosed Arti	cles of Amendment and fee a	are submitted for filing.	
Please return all c	orrespondence concerning th	is matter to the following:	
	End	c Steiner	
	N	Jame of Contact Person	<del></del>
		Firm/ Company	
	7218	N Glen Ave	·
		Address	
:*	Yampa, F.	Z 336 A	14
			<del></del>
		ein@me.com	
	E-mail address: (to be use	d for future annual report notification)	
For further inform	ation concerning this matter,	please call:	
Eric	Steiner	at (813) 944	-9868
Namo	e of Contact Person	Area Code & Daytime Tel	
Enclosed is a chec	k for the following amount n	nade payable to the Florida Depar	tment of State:
\$35 Filing Fee	\$43.75 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 A		Street Address	
Amendment Section Division of Corporations		Amendment Section Division of Corporations	
P.O. Box 6327		Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314



## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 13, 2011

ERIC STEINER 7218 N GLEN AVE TAMPA, FL 33614

SUBJECT: E. M. STEIN, INC Ref. Number: P08000080304

T . . .

We have received your document for E. M. STEIN, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

#### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 211A00008993



# FLORIDA DEPARTMENT OF STATE Division of Corporations

April 29, 2011

ERIC STEINER 7218 N GLEN AVE TAMPA, FL 33614

SUBJECT: E. M. STEIN, INC Ref. Number: P08000080304

We have received your document for E. M. STEIN, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

## Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 211A00010453

			<u>-</u>
Α	rticles of Amendmo	ent	
Ar Ar	to ticles of Incorporat	ion	
	of .	,	٥.
. E. M. S	STEIN :	INC	OII MAY
(Name of Corporation as current	ly filed with the Flor	ida Dept. of State)	ALCOREL
POSODE	DD\$03	04	AMASSA
(Document Numbe	er of Corporation (if ki	iown)	
rsuant to the provisions of section 607.1006, lendment(s) to its Articles of Incorporation:	Florida Statutes, this	Florida Profit Corporati	on adopts th
If amending name, enter the new name of th	<u> </u>		
Assurance P.A	_		The
me must be distinguishable and contain the	word "corporation	" "company" or "inco	+
breviation "Corp.," "Inc.," or Co.," or the de			
me must contain the word "chartered," "profes.			
Enter new principal office address, if applications of the principal office address MUST BE A STREET A		<del></del>	
			1
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	BOX)		
	•		
	<del>,</del>		
If amending the registered agent and/or regi		in Florida, enter the na	me of the
new registered agent and/or the new register	rea office address;		
Name of New Registered Agent:			
New Registered Office Address:	(Florida street	t address)	
-	<b>,</b>	,	
		T21 * 1	
	(City)	, Florida (Zip Code)	ļ

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

# It amending the Utilicers and/or Directors, enter the title and name of each othicer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary) Title <u>Address</u> **Type of Action** <u>Name</u> ☐ Add ☐ Remove ☐ Add ☐ Remove □ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) ssociation likeused speciality area Community Association 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)

The date of each amendment	(s) adoption: 4/6/11
	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 30 days after amenament fite date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re 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	cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	4/6/11
Signature	
(By 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 ointed fiduciary by that fiduciary)
	Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)