

PA000088907

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

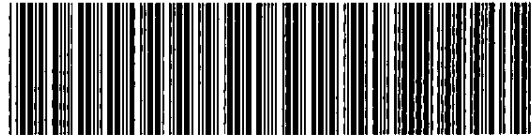
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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08/09/11--01005--016 \*\*52.50

*Amend*

FILED  
11 SEP -9 PM 3:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*11 9 9 1*

# THE KEANE LAW FIRM, CHARTERED

GREGORY G. KEANE  
ATTORNEY AT LAW  
BOARD CERTIFIED TAX ATTORNEY  
BOARD CERTIFIED WILLS, TRUSTS  
AND ESTATES ATTORNEY  
CERTIFIED PUBLIC ACCOUNTANT

DIANE L. STRICKLAND  
ATTORNEY AT LAW  
MASTER OF LAWS, TAXATION

ATTORNEYS AND COUNSELORS AT LAW  
1000 S.E. MONTEREY COMMONS BLVD., SUITE 202  
STUART, FLORIDA 34996  
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GLENN M. MEDNICK  
ATTORNEY AT LAW  
OF COUNSEL

DOYLE E. RICHARDSON  
ATTORNEY AT LAW  
OF COUNSEL

September 6, 2011

Florida Department of State  
Division of Corporations  
Amendment Section  
Division of Corporations  
PO BOX 6327  
Tallahassee, Florida 32314

**Re Articles of Amendment**

To Whom It May Concern:

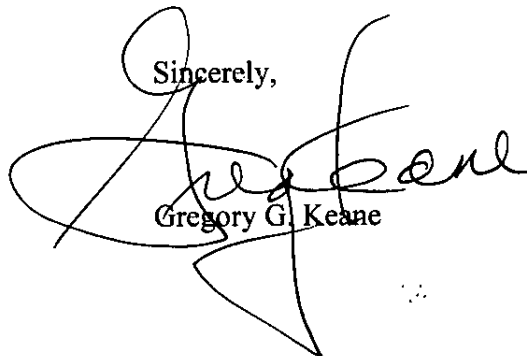
Please find attached hereto the Articles of Amendment in connection with Lowmilecollector, Inc along with our check in the amount of \$52.50 which represents payment for same.

Please forward the Certified Certificate of Status to our office in the pre-paid postage envelope attached.

If you have any questions regarding the above, please do not hesitate to contact our office.

Best regards.

Sincerely,



Gregory G. Keane

/ly  
Enclosures (Stated)

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** LOWMILECOLLECTOR, INC.

**DOCUMENT NUMBER:** P08000088907

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

GREGORY G. KEANE, ESQUIRE

Name of Contact Person

THE KEANT LAW FIRM, CHARTERED

Firm/ Company

1000 SE MONTEREY COMMONS BLVD. STE 202

Address

STUART, FLORIDA 34996

City/ State and Zip Code

ggk@keaneattorneys.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GREGORY G. KEANE, ESQ.

Name of Contact Person

at ( 772 )

288-0000

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 &  
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 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

LOWMILECOLLECTOR, INC.

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

(Document Number of Corporation (if known))

FILED  
11 SEP -9 PM 3:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**  
(Principal office address MUST BE A STREET ADDRESS)

1000 SE MONTEREY COMMONS  
BLVD. SUITE 202  
STUART, FLORIDA 34996

**C. Enter new mailing address, if applicable:**  
(Mailing address MAY BE A POST OFFICE BOX)

SAME AS ABOVE  
\_\_\_\_\_  
\_\_\_\_\_

**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:**

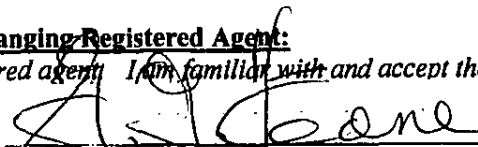
Name of New Registered Agent: GREGORY G. KEANE, ESQ.

New Registered Office Address: 1000 SE MONTEREY COMMONS BLVD. ST  
(Florida street address)

STUART, Florida 34996  
(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)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>PRES</u>	<u>JOHN GEOFFREY LEEDS</u>	<u>2355 NE OCEAN BLVD. 32A</u> <u>STUART FL 34996 US</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>PRES</u>	<u>ANTHONY LEEDS</u>	<u>525 Park Avenue</u> <u>New York, NY 10021</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>VP</u>	<u>JOHN GEOFFREY LEEDS</u>	<u>2355 NE OCEAN BLVD. 32A</u> <u>STUART FL 34996 US</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

N/A

**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)*

N/A

**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**

<b>Title</b>	<b>Name</b>	<b>Address</b>	<b>Type of Action</b>
VP	MERRIE GRIFFIN	#7 Lowndes Place London, SW1X8DB	ADD
SEC	JOHN GEOFFREY LEEDS	2355 NE Ocean Blvd. 32A Stuart, FL 34996 US	REMOVE
SEC	ANTHONY LEEDS	525 Park Avenue NY, NY 10021	ADD
TRES.	JOHN GEOFFREY LEEDS	2355 NE Ocean Blvd. 32A Stuart, FL 34996 US	REMOVE
TRES.	MERRIE GRIFFIN	#7 Lowndes Place London, SW1X8DB	ADD

The date of each amendment(s) adoption: AUGUST 10, 2011

Effective date if applicable: AUGUST 10, 2011  
(date of adoption is required)  
(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 26<sup>th</sup> August 2011

Signature Merric Leeds Griffin  
(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)

MERRIC GRIFFIN  
(Typed or printed name of person signing)

Vice President  
(Title of person signing)