P08000089499

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03/23/09--01042--022 **43.75

2009 HAY IL AM 8: 45
SECRETARY OF STATE

NC TB 5-19-09

COVER LETTER

Division of Corporations TIME ENTERTAINMENT ENTERPRISES, INC. NAME OF CORPORATION:

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

Please return

n all correspondence concerning this matter to the following:
MARIA T. VICTORERO (Name of Contact Person)
INCORPORATIONS, PAYROLL BOOKKEEPING SERVICES
14750 N.W. 71 ct. Suite #303
Miami Lakes, Fl. 33016 (City/State and Zip Code)

For further information concerning this matter, please call: Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee

TO: Amendment Section

\$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



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 25, 2009

MARIA T VICTORER**D**INCORPORATIONS, PAYROLL, BOOKKEEPING SRV
14750 NW 77 CT STE 303
MIAMI LAKES, FL 33016

SUBJECT: PARTY TIME ENTERTAINMENT ENTERPRISES, INC.

Ref. Number: P08000089499

We have received your document for PARTY TIME ENTERTAINMENT ENTERPRISES, INC. and your check(s) totaling \$43.75. 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.

The document number of the name conflict is P03000118654 - MESA ENTERPRISES CORP.

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.

Letter Number: 009A00010068

Teresa Brown Regulatory Specialist II

· Articles of Amendment

to

Articles of Incorporation

of

DI To P4+	" オレナ · cie	
Dity me anergo	nume It could be	sotto.
(Name of Corporation as currently file	Mith the Florida Dept. of Sta	<u>te</u>)
1080000894	<u> </u>	
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florid following amendment(s) to its Articles of Incorporation		Corporation adopts the
A. If amending name, enter the new name of the cor	poration:	
Eddy Mass Fraterinisa	s Com	
The new name must be distinguishable and cont	'ain the word "corporation,"	"company," or
"incorporated" or the abbreviation "Corp.," "Inc.," "Co". A professional corporation name must		
association," or the abbreviation "P.A."	\ \	, projessiona
B. Enter new principal office address, if applicable:		7. 28
(Principal office address <u>MUST BE A STREET ADD</u> I	(ESS)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	 	PR T
	<u></u>	ASSEE F
C. Enter new mailing address, if applicable:	1)/\(\lambda\)	E E
(Mailing address MAY BE A POST OFFICE BOX	$\rho = \frac{\rho / N}{\rho}$	- <u> </u>
•		<i>3</i>
D. If amending the registered agent and/or registere new registered agent and/or the new registered of		er the name of the
1	/X\	
Name of New Registered Agent:	// 4	<u></u>
		-
New Registered Office Address:	(Florida street address)	
	(0:4.)	_, Florida (Zip Code)
	(City)	(Zip Coae)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent.	tered Agent:	the Allerdan Aller
position.	i am jamiliar wiin ana accept	i the obligations of the
N/XI		
Signature	of New Registered Agent, if char	nging
	· · · · · · · · · · · · · · · · · · ·	

<u>If amendi</u>	ng the Officers and/or Directors, ente	er the title and name of each officer/d	irector being
removed a	nd title, name, and address of each (NIA
(Attach add	ditional sheets, if necessary)		77/1
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
	<u> </u>		_ 📮 Add _ 🖵 Remove
			_ 📮 Add _ 🗖 Remove
E. <u>If amer</u> (a <i>ttach d</i>	iding or adding additional Articles, e udditional sheets, if necessary). (Be s	nter change(s) here: A	
provis	mendment provides for an exchange ions for implementing the amendmen not applicable, indicate N/A)	t if not contained in the amendment	

• • The date of each amendmen	t(s) adoption:
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amenament file dute)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement of 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/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated	5-11-09
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	President (Title of person signing)